

Virtual Visits: First Impressions Survey Brief Summary

Many thanks to the sites that took the time to respond to this survey. The Clearinghouse on Supervised Visitation appreciates your input on this newly developing topic.

The purpose of this survey is to learn how SV programs are transitioning to virtual visits and training staff in their use, how virtual meeting platforms are being used by SV centers to accomplish monitored family visits, whether the services offered by the Clearinghouse on Supervised Visitation have been helpful, and how clients are reacting to virtual visits during the COVID-19 quarantine. A brief summary of the results follows.

Transitioning to Virtual Visits

Of the 26 programs responding:

- 22 are offering virtual visits currently
- 4 sites not offering this option
- 3 of those 4 are planning to offer virtual visits in the future
- A majority began virtual visits in the last 2 months
- 2 have been conducting virtual visits since 2019
- Approximately 58% charge for these visits - 42% do not
- Prices range from \$10 - \$125 per hour.

A variety of meeting platforms are being used:

- 60% of sites using Zoom,
- 6.7% using Microsoft Teams
- Others (33%):
 - Let's Talk Interactive
 - Doxy.Me
 - Skype
 - Skype for Business
 - Face Time (iPhones)
 - Jitsi Meet
 - Google Duo
 - Imo

When asked how difficult it was for staff to learn how to effectively use their chosen technology:

- 52% said it was **Very Easy**
- 33% said it was **Somewhat Easy**
- 5% were **Neutral**
- None reported that it was difficult, however one site noted that it depended on the staff members beginning level of understanding of technology.

Clearinghouse staff are currently researching and testing various platforms and the options they provide, such as the Monitor's ability to control the call should problems arise.

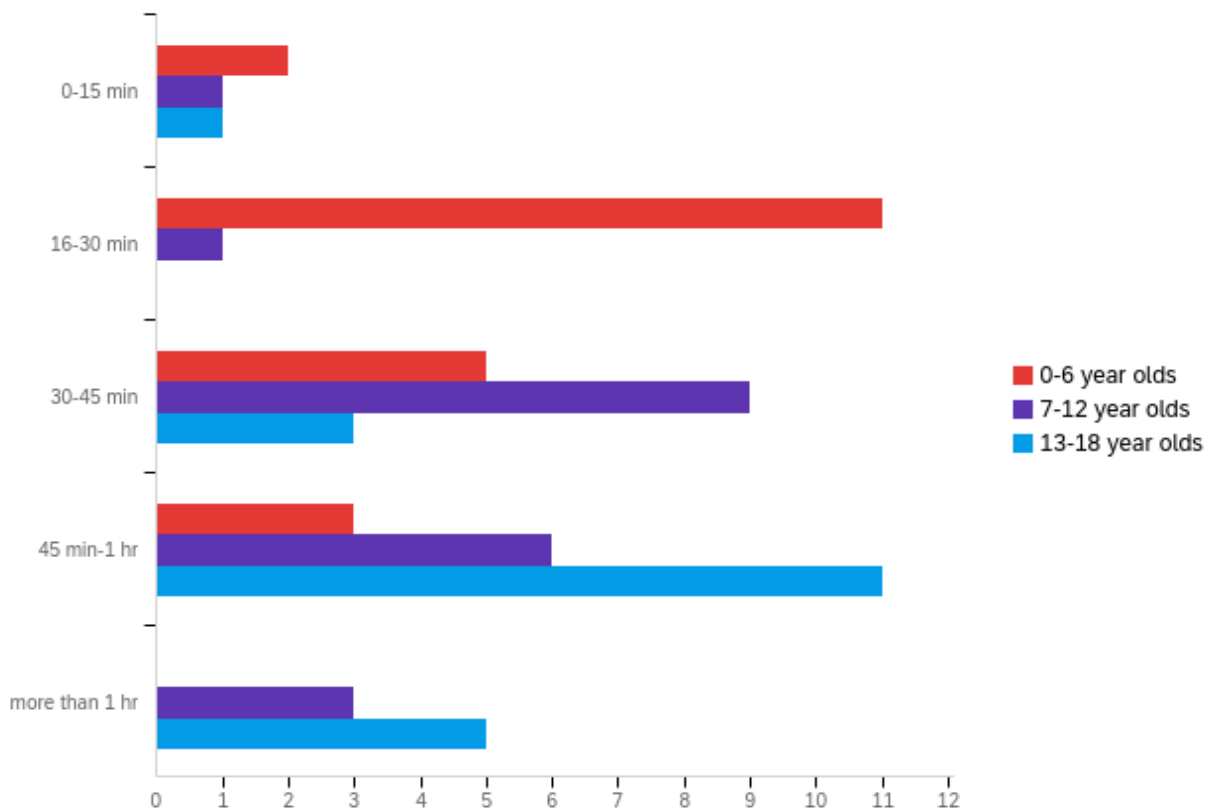
As in-person orientations for new clients are often not possible now, many sites are offering virtual orientation.

- 68% of responding sites are offering virtual orientation meetings for **Most** or **All** of their clients.
- 19% are offering virtual orientation to some clients and

- 14% are not offering them at all.
- The cost for a virtual orientation ranges from free to \$100. (

There has been extensive of discussion on appropriate call length for virtual visits, depending somewhat on the child’s age. The following chart shows a breakdown of call length by age.

- Fifteen to 30 minutes is the most common length of time for children 0-6 years old.
- Seven to 12 year-olds are most often visiting 30-45 minutes and
- Older children, 13-18 ys. old are more likely to remain on the call 45 mins – 1 hour.
- A number of calls in the 7-18 year-old range have gone longer than an hour.



Clearinghouse Technical Assistance

The Clearinghouse strives to provide technical assistance and training for every aspect of Supervised Visitation, with our most recent efforts focusing on helping sites transition to virtual visits. We have offered a number of teleconference opportunities for discussion, as well as learning ideas and best practices on virtual visits. We hope you have found them useful and, in this survey, encouraged participants to share their thoughts and ideas with us.

Of the responding sites:

- 88% offered **Most** or **All** of their staff Clearinghouse training materials and/or calls
- 5% offered Clearinghouse training to **Some** staff

- 8% did not offer Clearinghouse training to staff

Additional staff training provided by sites occurred at

- 80% of sites
- 20% did not offer additional training to staff

The Clearinghouse has held five teleconference / Zoom calls discussing virtual visits, technology updates, and safe practices. Calls had between 29 and 46 participants. Of responders:

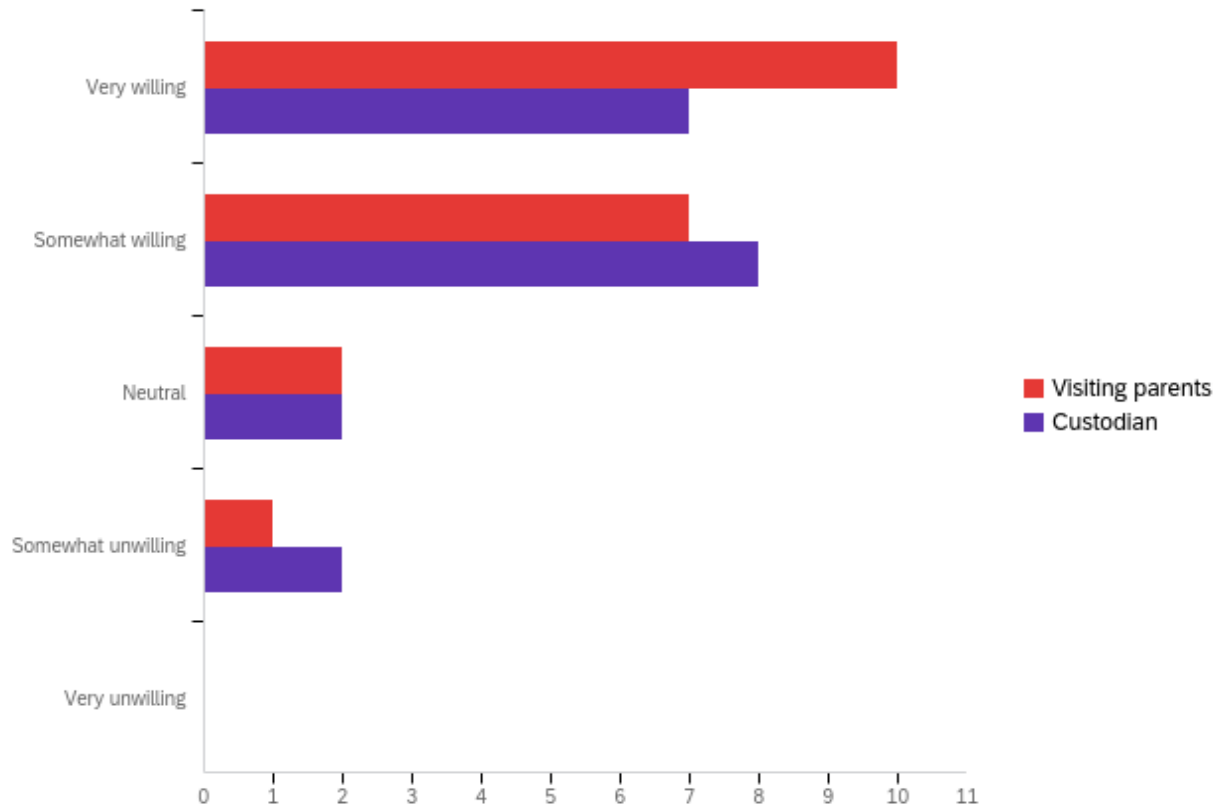
- 61% had participated in a Clearinghouse call
- 39% had not participated in a call.
- 50% who participated joined 3-4 calls
- 36% joined 1-2 calls
- 19% joined more than 4

Asking respondents how helpful they felt the calls were,

- 100% found the calls **Somewhat** or **Very Helpful**
- 93% stated they were able to use the learned information **Often** or **Always**
- 7% said they used the learned information **Sometimes**
- None reported the information was **Rarely** or **Never** used

Client Concerns

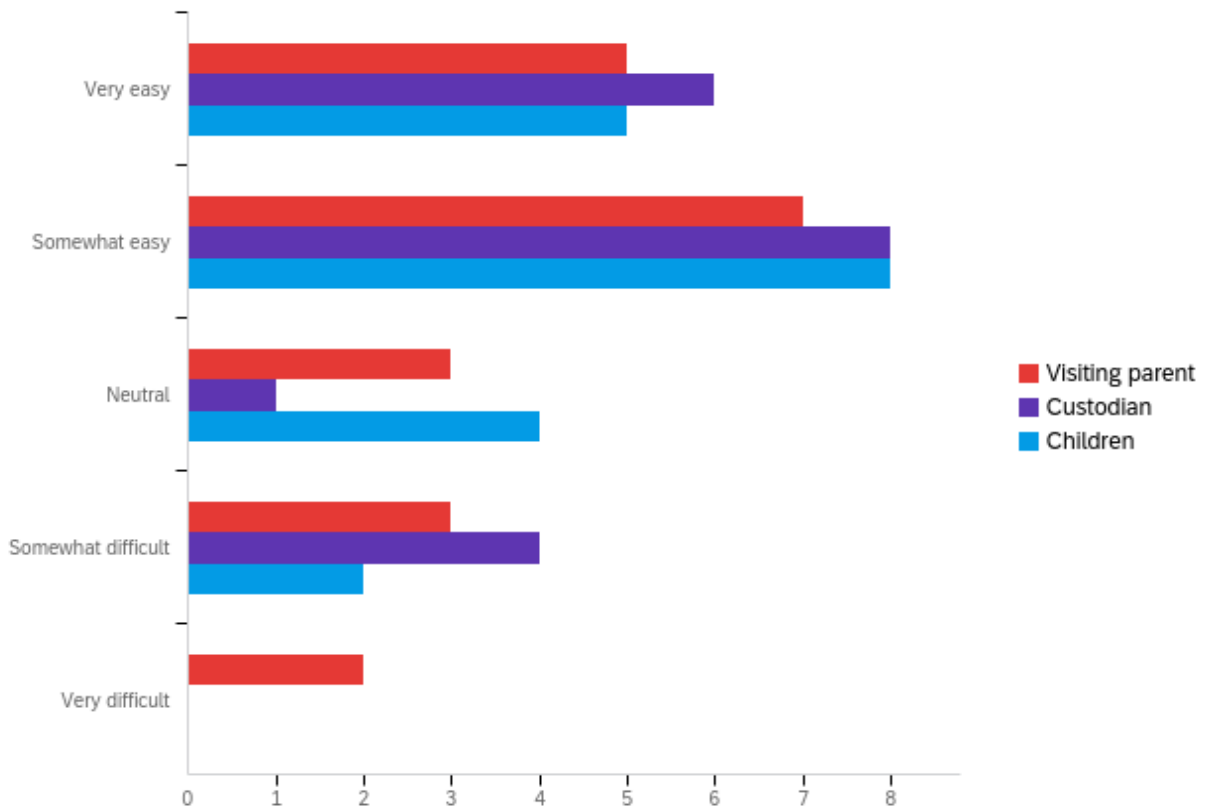
The following chart shows how willing clients were to plan and participate in virtual visits:



- 85 % of Visitors and 78% of Custodians were **Somewhat** or **Very Willing** to participate.
- 10% of both were **Neutral**
- 5% of Visitors and 10% of Custodians were **Somewhat Unwilling**
- None of the participants were reported as **Very Unwilling**

We asked how difficult it was for clients to learn the chosen virtual video platform

- 50% of Visitors, 72% of Custodians and 68% of Children felt it was **Somewhat** or **Very Easy**.
- Only 2 programs said a Custodian found it **Very Difficult**
- Children had the easiest time with none reporting it was **Very Difficult**



Comments

We asked responders for open comments on several subjects with results below:

Advice for Other Programs

- Yes, have a lot of patience!
- Continue to enforce rules, be straight forward and remind parents of the rules and that you can and will end a visit still.
- If Family are using iPads or phone to have visiting parents/children to propped phone/ipad so it is not moving.
- Breathe. Go slow. Don't be anxious or over stressed. It will be ok.
- Encourage Parents to have activities ready before the call starts (Hangman, tic-tac-toe etc)
- Offer it as often as possible so you always have a back up in place even after the pandemic
- Have the parents show you the area that they are in to make sure no one else is in the room, that should not be part of the visits

- Do it! The most resistance was within our organization; our clients were eager and they have really been grateful for the chance to do it. Even parties we expected challenges with have been very cooperative
- Our children are mostly in foster care so our parents are dealing with substance abuse and mental health issues. May be different than the average population of supervised visits.
- Patience/ a lot of visit activities, caregiver buy in
- break up visits for younger children. Rather than a 1 hour visits, offer 3, 20 min visits

Describe Positive Experiences You've had Through Virtual Visits

- It was very exciting when we finished our very first Virtual Visit and we saw how excited the child was to see the visiting parent.
- Visiting parents have been so happy to be able to lay eyes on their children. They've all been very thankful.
- The children appear to be engaged with the parents during video visitation
- It has allowed me, as the supervisor to observe the children's home environment
- Have had many positive experiences over the years. Very helpful in keeping kids connected with family.
- Hearing the parent encourage schooling online and allowing the children to express how this is affecting them.
- The children are happy they're not missing a visit with their parents
- I see no difference in terms of monitoring.
- We have had parents that never show up to a face to face visit, fully participate in virtual visits
- Kids sharing aspects of their lives that they can't share in a visit at our center, such as showing parents a favorite toy or how they ride a scooter
- Success in parents and children seeing and talking to each other during these difficult times.
- The visiting parent and child played educational games and it was fun for them. The child expressed at the end of the Virtual Visit that he would like the next visit to be longer.
- Many of our visits have gone over 1hr. Children are more open to the virtual experience and seem to enjoy it.
- Parents have been able to maintain contact with their children
- Slow start but people are getting more used to it

Describe Negative Experiences You've had Through Virtual Visits

- Took 3 hrs to get one Cust Parent going because she was not understanding how to properly use the devices, but we finally got her going.
- Several complaints regarding background noise that is not controllable.
- Visits usually do not start on time due to parents having difficulty accessing the video visit invite
- Making sure custodial parents give privacy to the children during the visitation call
- Feeding families tend to bring drama into the visits; string boundaries become tiring but a must.
- Younger children getting bored or distracted
- The visiting parent doesn't have anyone to help with the difficulties should one arise
- Interference from the custodial parent during the visit
- Audio not wanting to work on Government issued phones & parents that have injunctions trying to visit together
- None, but we have had challenges in figuring out who can help supervise the child if the parent has a no-contact order, that has been our biggest challenge
- Parents angry and lashing out and blaming DCF for their circumstances.
- Caregiver & parent hesitancy
- Client using an app to hack the application

Misc Comments

- Thank you for all you do!
- Thank you Karen and your team.
- Continue to encourage the parents to praise the children for all they are going through
- Overall love the process
- This has all been very helpful
- Our program works exclusively with Dependency cases. Since the pandemic, the Case Management Agencies have taken over virtual visits. Our program offered virtual visits, however, the case managers reported that the visits were being handled outside of the program for now.
- For 10 years all of my visits are off-site at public locations or approved in-home locations.
- Your research and trainings have been a tremendous help to our program
- Your support has helped us make this an easy transition overall

- We provide therapeutic supervised visitation. We have a contract with our CBC to provide visits for children involved in Dependency. We currently do not have any private pay clients at the moment.
-
- Courts are on pause but parents are trying but are being more cautious to use because of the current status of the virus

How did you prepare for virtual visits? What resources helped you?

1. Had to figure it out immediately! Worked with IT to ensure HIPPA compliant, used zoom, skype and google duo, but skype was harder, used zoom most. But sometimes caregivers didn't like their info being shown so they like skype (can hide identity and e-mail) no in-house training were thrown in very quickly, once info came from Karen, it was shared with staff at zoom staff meeting. Each case manager had to schedule their own visits.
2. Self-educated – researched options, knew skype so started there, watched YouTube videos on using zoom, Clearinghouse info was great, conference calls great!
3. Happened very fast, transitioned in just a week once the court approved them. Gathered all the electronics they could to test, started with skype and google duo and then zoom. Met with each other on Teams Meetings to go over staff needs. Took 2-3 weeks to really get things set and going. Company gave monitors laptops. They communicated with all the parents and caregivers, new adjustments, did VV orientations and helped them learn the technology if they were inexperienced. Also had to work with caregivers or FPs who weren't tech savvy to figure out best way to do it. Clearinghouse suggestions were a huge help!
4. Clearinghouse and SV Network for guidance, created our own policy, started in mid-march
5. Had been using zoom for other work and so she suggested it. It has worked very well. Used most of the classes, conference calls and resources from the Clearinghouse – passed on to all. I can't thank you enough for all the resources – the little things that helped like pushing the space bar to talk, were invaluable. How to talk to those who are inappropriate. Preparation is best, did pre-calls on zoom to go over ideas for activities on the calls. Caregivers also had to prep – set it out for kids, then back out of the room if they can. Let them know in advance we might randomly ask you to pan the room with the camera to prove no one else is there.
6. Clearinghouse info was great, then also looked at what would work with our center and our clients, sent out our lists of ideas in advance to help parents get ready and plan for visit.
7. Challenging, but learned zoom quickly. Had to learn how to ensure safety. Also had to learn google duo and skype. But got the hang of it quickly. Used the Clearinghouse resources – were great!! Also sent this info Family support workers. Got additional direction from CHS, QPI, upper management. Case managers or FSWs (monitors) did orientation to VV with families.
8. Practice calls, Clearinghouse info and calls – very useful! Learning curve, but mastered it! I was very impressed with the trainings and comfortable that I can call you anytime if I have question.
9. Tuned in to all the Clearinghouse calls, prepared new protocols and orientation to VV for clients with those docs.
10. We had in house training but mostly the Clearinghouse trainings which were most helpful. Then we were told we had to use Jitsi Meets after the Zoom initial scare but it doesn't work well at all. I snuck back onto zoom. Did orientations to VV and practice calls first, during pre-visits (before every visit) and post visits, went over tech issues.
11. Info came from the statewide directives, from DCF guidelines, and CDC guidelines, using zoom. Closed office March 16th, started VV next day. Cleared on zoom, jumped in! A week later we got a Hipa Compliant account on zoom. Ordered cell phones for everyone on SV

team in case visits were just audio by phone. Using training guides on zoom and other Clearinghouse resources, shared with clients as well. Contacted all well in advance to be sure tech is good and confirm and follow up with rules and expectations.

12. Clearinghouse prep, then agency asked them to use Jitsi Meets which she feels is much worse than zoom. (can't record!) Often can't get it working. Lots of tech troubles, not secure, hang up didn't happen even though she as host ended call. Liability!! Not allowed to use zoom.
13. Clearinghouse hugely helpful! I don't know what we would have done without the Clearinghouse. Great hands-on, not philosophical info. We had done some VV with jail, but it was not well done. Now we're experts! We had no structure, other prisoners would pop in the view, etc. Now we have a great framework, a plan, and guidelines and protocols to do VV. Incorporated a lot of info other providers in the state were using, learning from their problems, errors. It needs to be very well thought out and having all the minds and resources from the Clearinghouse made it much easier and more successful. Started with zoom meetings with clients individually as practice calls, orientation to VV. Went over guidelines and checklists – what room will you use, will people walk thru, etc. Must be quiet place, etc. Gave a written list of expectations and protocol they had to agree to. 30 minute visits only, used the waiting rooms, able to check-in on each side that they were in good room, good state of mind, all good, etc. Started VV April
14. Used SVN and Clearinghouse info, calls, virtual trainings – brainstormed together on ideas for clients. Talked to clients to get their viewpoints, did orientation with new protocols, used Skype. We decided that in order to have more control, visitors would make their video calls from our office. Parents had to sign a covid disclaimer, masks, temp check with visitor in office, so just kids and custodial on the other end at home – this way we had more control over the call itself.
15. Were aware of Google Duo and Zoom, then the CBCs mandated no in-person visits - we got calls asking for VV and got thrown in! The clearinghouse info and calls were tremendously helpful and came at just the right time.
16. Clearinghouse info and calls – if it wasn't for you all we'd be lost! You set the tone for what has become our VV program. Zoom help and guidelines, protocols very helpful, expectations were clear with the docs. We did a staff training based on your materials and info – thanks!!
17. Family support workers, case management staff, monitors, etc - brought everyone together to research alternative ways to work with clients. Reviewed lots of info, considered bandwidth. Have both very rural with bad wifi, but others with better, urban, Zoom, facetime worked well. Doing orientation with clients on VV, letting them know rules apply and that they have to comply just as in a normal visit. They have a great IT dept that really helped research and prep for calls, what's available what will work for them, etc.
18. Got thrown in right away – sink or swim! Teenaged kids helped a lot with technology, IMO app. Unfortunately too swamped to sit on Clearinghouse calls but am thankful for the written resources you handed out.
19. Using zoom, [organization] gave them training on HIPPA compliance. Were on some calls but had trouble getting info to parents because she doesn't have their e-mails but sent info to case managers. Couldn't do it until they were trained so case managers did VV
20. Relied heavily on the Clearinghouse info. We had to start immediately with VV, got license on Zoom and took off. Started calling parents, many who hadn't even started in person yet. Used our zoom guidelines and reviewed them with every parent. Then got availability times and started scheduling. Added about 20 new cases but wouldn't have had enough time or

space to see them if we were doing in-person visits. You can fit in a lot more cases with VV. But had to limit it to one hour.

21. At first used skype but switched to zoom – easier for clients. Taught clients to use zoom, practice calls going step by step. Didn't know about our calls or info – would love it!
22. The clearinghouse training was a great background about what to expect even though we used Teams. Your resources were great. We had clients sign in as Guests so they don't need a Teams Account. We did VV orientations, addendums to normal visits, went over new rules. Advance calls to make sure backgrounds are good, tech in order.
23. Held meetings with court admin, did virtual orientation with clients and kids to get them used to it, made schedules for 2x a week, used the handouts from clearinghouse with suggested guidelines, with DV we emphasized safety measures and ideas for feeling safe during VV. Clearinghouse resources ABSOLUTELY useful.
24. Training done on zoom, [organization] did a series on best practices, how to engage families. Didn't know about Clearinghouse calls or info

How have Your Procedures or Times Changed?

1. We have a new orientation for VV which reviews the same rules that apply to in-person. Trying to break up longer visits to 3 shorter visits for younger kids who didn't do as well in long VV visits. Have been able to offer visit times at many different hours. Each monitor was allowed to work out times that worked for their families. Now that In-Person returns, will have to go back to the central reservation process. Most ready to go back to normal visits.
2. Did do practice calls. Had to do orientation to review protocols and policies, and ground rules for VV had to do that before first call, acknowledge and agree to them as well. All before first visit. Times are much more flexible, really all day available instead of just afternoons. Were able to get a lot more visits in. We offered only 40 minute visits, so they got 2, 40 min visits instead of 1 for 90 mins.
3. We can offer many more time frames now – we can do 9am and then also later than usual like 7:30 or 8p (normally 10-7) Working from home made it easy. It really cut down the no-shows and cancellations since we could work with the parent, especially since most people were at home. Some longer visits were split into a few smaller visits, which also gave families practice. Because visits were easier, they actually got more visits in than usual.
4. Lots of training, lots of practice. Called them 15 mins in advance to get it set up. Enhanced policies for the few in-person visits that continued like temperature, hand washings, questions on travel, flu symptoms, Different times? Have offered more hours and different times, have many available staff.
5. No transportation hassles, less support workers need. Normally with drive time, can do 8 case a week, now with VV they can do 20-25 a week! Let them know in advance we might randomly ask you to pan the room with the camera to prove no one else is there. Already have wide flexible hours – 6:30a – 9p so VV just changed quantity.
6. Back to in-person now (June 11th), but many opting to use VV in alternating weeks. Good for long distance. Morning slots best for younger ones, could work around naps. Didn't expand hours, but were flexible. I stayed in office whole time, paperwork, etc.

7. We've been more flexible, accommodating family schedules, especially with custodians now involved. Since transportation isn't an issue, can offer earlier and later visits. Lots seem to prefer evenings because they can do it after work, not miss work.
8. Only thing that's changed is that it's on zoom. Normally open 7 days a week and holidays. All visits are off-site, not in my office. We meet where the client wants to. Try not to do much night visits – up to 8p only.
9. The agency that gives them their referrals, Heartland, decided not to use her agency for VV and instead just allowed the Visitors and Custodians to arrange calls between themselves. Now that they are returning to in-person, she hopes they don't decide to keep it all in house from now on.
10. Not really but other monitors have been able to add visits. But she has more flexibility in times of visits, when to do them.
11. Much more flexible on dates and times for visits. Easier when all at home. For some visits, doing one kid at a time or split larger groups into two different calls. Can do visits while on lunch break, etc. Connection issues do pop up. At first clients had tech problems, some did audio only, but now most have adapted to zoom.
12. You have to make sure they call you after the visit to debrief, and after visit, discuss issues. Able to do more visits a week with a client, usually shorter, but same time overall. Before moms sometimes took days off for visits and case workers picked up kids. Always had day visits too so no difference.
13. Kids must use headphones. Hours are now very flexible, which made it easier. Able to offer morning visits which work out much better for younger kids. Going back to in-person, leaving time in between visits for cleaning. Staff wears masks, visitors wearing masks (parents only) because staff requested it. Take a mask off for hugs and kisses. Wash hands first thing in waiting area.
14. Already pretty flexible. Reviewed rules and protocols.
15. Text them 15 mins in advance to be sure all tech is set up, have done practice calls, go over policies and procedures even though some are resistant. (Kind of time consuming for time we aren't paid.)_ We've always offered extended hours so not much different. Being flexible. With limited staff (furloughs) can't offer more visits than normal, in spite of easier.
16. We did test calls with everyone before visits. Doing morning visits now and weekends as well.
17. No great procedural change. For us it's been positive, no loss in drive time, no transportation coordinatization issue. Cancellation doesn't mean you're out there for nothing and 2 hours away from next visit. Fewer cancellations and no-shows.
18. No 15 min early arrival anymore, IMO app has no waiting room. Now we can do visits at all hours, has really opened up the ability for people to participate, it's much easier on custodians, foster parents. Scrambling to do 4- 1 hour visits, I did 1 four hour slot, but kids wouldn't stay on that long. So I gave them their 4 hour slot and would try to call back after breaks. Foster parents have been great trying to help kids participate.
19. New protocols like no others in the room, still have to tell them they can't say certain things or we'll turn off the mic. Preparing now for in-person again so adding to intake forms info on

new covid protocols like temps and masks. 9-6 kept same times. Cancellations about the same, just rescheduled.

20. Doing 15-20 mins orientation in how VV s will go is crucial! Intake and orientation, I do now instead of case managers. I know my own schedule Used to be done at 6, now sometimes a little later. Can't work much past six because they can't work that many hours (8-6) No weekends – too many hours.
21. High demand and able to get more in as VVs to start. Schedule is completely changed, had to reschedule at all different times. Only offered 1 hour every two weeks, but now offering 1 ev. week because it's easier. Some clients doing more but shorter visits, with younger kids. Also expanding hours since it's from home. Actually more no-shows and cancels from the custodial side, visitors much better.
22. Yes, we used to do only weekends, but VV is done throughout the regular day from 8-6:30. Judge ordered at least 15 min VV per week. If client needs it in small block rather than large times it's ok - if that's what they can do - lunch break, etc. Mornings great for younger kids. Fewer cancellations and no-shows! Some run late, but easily fixed.
23. Used to only do visits on the weekend, now do them all the time, except Sundays, up to 8:30 at night.
24. Flexible to clients

How do You Foresee Using VV After the Pandemic?

1. It's possible in some cases if that's what we need to do to keep families in contact. Families out of state or out of town, if only video contact is ordered, it's a possibility, But only want to offer it as an option if it's the only option.
2. Loved VV, it saved SV! If we had to go this many months without visits and billing we would have closed. Also the kids didn't have to go so long without comforting words from their parents.
We fit in more VV than in-person visits. Will not drop any cases due to times. Yes, keep it for various options, child summers out of town, parent out of town, sickness. But we don't want it to become the lazy option. Cancellations and no-shows about the same. 97% regularly show. We are sending reminders of VV. Able to let VV in emergencies, rather than a cancellation, but not take advantage of it. Would allow it if need arises, but prefer all in-person visits if possible.
3. It will be useful to help stop cancellations and no-shows. It allows for more accommodations in schedules. Sometimes work times didn't suit visits but VV Flexible. Touch is very important, but VV is a great option especially if during visit time, baby is sleeping, child is tired, etc. Out of town parents, babies being removed from hospital have never been with a parent, but VV a few times a week to see, sing to, etc. the baby - can help with transitions later, good for parents in jail, far away. Great when you have several siblings in different homes, counties, etc. Don't have permission to transport from some counties, but can bring those kids in via zoom. Otherwise you need three different caseworkers to go get kids to the center to visit. Would be good in an alternating system, as a secondary option, maybe if one

kid was too sick to visit, he could call in. IE had to close one case because 1 or 3 kids was out of county and they couldn't transport him, VV would have allowed them to keep the case.

Some visits we opened during quarantine with VV, we may have to drop because of in-person constraints like transportation and the number of visits you can fit into an in-person schedule. We can do more with VV but if back to In-person, we may have to drop a few. Including cleaning, it could be 3 hours per case while now it's 1. We want to try to accommodate, but the bosses will decide how much we can use VV.

4. Yes! As intro visits to abuse cases, scared kids, parents out of state, to avoid last minute cancellations, but not if child is autistic or non-verbal, infants not very useful.
5. If they're sick, they can still visit. Will use it to get kids used to seeing parents, great stepping stone when needed. Scared kids, untrusting kids can use this as a first step. Monitor can even be in the center with the kids and together they can zoom parents. That builds trust for later in-person visit. Will offer it on a case by case basis. Kids under 4, instead of 1 hour, doing 3, 20 minute visits - so VV is more economical, easier. Sibs that are separated can be easier on a VV, in-person in this case is very involved and costly -transportation, staffing, etc Even 4 different visits can be easier. Will have to sadly transition back to old schedules, less visits. Case managers will have to conduct other visits until we can get them in our schedules. Hoping we can actually keep some on VV to keep the visits going after in-person. Will like to offer VV in future, but have to talk about if clients get VV by request or if we decide when they are a good addition to the case. Have to get judge's permission.
6. Yes out of towners, for first visits where they're nervous, we will be incorporating the option for all clients. Going to ask judges to write it into the orders. Upon reopening, going back to in-person will take protocols – face masks, 2 families in building at once (City bldg requirements)
7. Got to see a real home environment and pieces of their life. Parents got to help with homework. Not sure if we will, hoping to go back to mostly in person. Good for out of towners, sickness, weather, transportation issues (we cover all transportation). Better to do a virtual visit than cancel, better than wasting time, do the VV and get the \$. Going back, we'll have to reduce the number of visits or cases, and they have to understand that we will have to go back to regular hours. It's been appositive experience, because you get more work done from home. Would like to be able to do both in the future. Definitely more productive from home.
8. Yes! Definitely a new option to offer clients. If they have transportation problems, or bad weather, a good warm up option, but not the easy out or just lazy option. I like the VV as an option.
9. The agency that gives them their referrals, Heartland, decided not to use her agency for VV and instead just allowed the Visitors and Custodians to arrange calls between themselves. Now that they are returning to in-person, she hopes they don't decide to keep it all in house from now on. She would love the opportunity to incorporate VV into their service model.
10. Yes! Great when kids are far away or in different counties, hard to get to center. 2 hour car ride + 2 hour visit + 2 hour car ride home is tough. But parents will still want the touch. So it

won't replace SV but it's a benefit when needed. Focus on parents becoming better parents, lots of parent education.

11. Yes will keep it afterwards for parents who would miss otherwise. Teenagers are fine, younger kids are much different, in person is much better for them. Contractually, face -to -face is required so we'll have to amend that to allow zoom permanently. Definitely an option to keep.
12. For some visits as needed but prefer in person. It will be an alternative, use both. Will not give them the option, but will allow VV to be added as appropriate – if they are doing well in person. Can add it on perhaps.
Doesn't replace the human touch. Really misses in person visits. You need to see how a mom holds a baby, how they interact and talk to a baby to see if they're on track. With a baby or very young kid, not so good. Babies need to smell you, feel you, to bond to you. See mom's protective capacities. See how mom changes a diaper. See how she handles and reacts to a baby that's upset, in distress. Teach them how to be moms, how to handle kids is a thing you teach in person.
13. Absolutely see using them, especially for prison pre trial or inmates. Much better equipped for those now. Good for chronically ill kids or parents, out of town, deployed parents. Good to have those with transportation problems now visiting, but don't want the CBC to think this is a final solution and ignore transportation issues. VV language should be in all court orders from now on for all cases, because things like hurricanes happen to everyone. Transitioning back should be easier, because we can go a little at a time. We will do it slowly. Normal will never be the same. This will always be an option.
14. Yes – absolutely would. I feel confident in my ability to use them now. Good for out of state or long travels. We have a good process in place. But only as a secondary in certain cases. In person better.
15. There are good benefits VV can accomplish but only as a second resort. Negatives have outweighed the positives. Actually more no-shows and cancellations maybe because they are increasing the amount of visits – instead of one 60 min visits, now 3 20 min videos. Yes – will have to consult with judges and CBC if they can keep it as an option. Face to face increases the bond, touch so important. Face to Face as much as possible. With 4 kids on a VV, more often each wants their own visits, not all there together anyways. A couple cases with parent in jail would be a good case for VV. Going to try to get more VV in prisons and jails. Small kids could forget their parent so easily if they're in jail 9 months. Also if someone is in hospital or out of town, at least VV is some access. Overall you can't replace the in-person experience.
16. A child that was autistic has an 8 year child sis that's not, autistic child often took up so much of the parent's time, but on phone it's easier for other child to get in there and have quality time. Will keep using for cases where safety is a concern, those with transportation issues, those with long travel or who travel for work, **less traumatizing for kids if parents don't show so maybe a good first start to each case?** But not good for toddler or babies that need interaction and touch. Not great for families with multiple kids in multiple places – hard to schedule all at once. Don't add extra visitors not on court order.

I can say VV has made it easier - less paper work, we have lessened notes on each visit since now we have 4 visits of 1 hour instead of 1 four hour visit. Instead of 4 full notes, we let them do a little less. Transportation is much better obviously. Only complaints by staff was the paperwork, before this. In the future it will be an option for sure. VV wouldn't be good for parents that don't want other parent anywhere near, not seeing in the house, not seeing them at all when holding the phone, DV cases no good. Also sometimes a foster parent listening in on visits and later questioning the monitors on how and when they interact in the visit, critiquing – not good.

17. Yes, reduce cancellations and no-shows, getting large sibling groups together – more contact even if not face to face, less transportation hassles. Future will depend on court orders, but VV will hopefully supplement not replace in-person. Fitting in more visits. Overall positive, clients have shown their resiliency, they're appreciative. Like having access to their family in tough times.

Pros:

- More flexibility time-wise, visits do not have to be all in the evening or morning due to schools being out
- Easier on staff and kids/no transporting in cars
- Less barriers overall
- During this time of Covid 19, caregivers did not want the children going out or people going into the home due to the possibility of the spread the disease to them or their family members

Cons:

- Parents and children did not get the physical contact/lack of bonding for young infants/babies to their parents
 - Harder to tell if a parent is under the influence.
 - Visits aren't as good when a child has poor WiFi and their screen keeps freezing, harder to hear.
 - Small children are observed to sometimes struggle to stay on the screen and stay focused
18. They are good for kids far away, they won't transport kids across county any more. The CBC likes the convenience. Less no-shows, but still lots of missing – sleeping through visit, not answering phone. A lot of parents out shopping or at work, not taking it seriously, having people not supposed to be there saying Hi – loss of control over the visit
19. Babies and toddlers need touch. Maybe transportation problems now that some caregivers have other kids at home and can't get to visits with one of the kids. Yes maybe for cases if baby is in hospital while parents here, parents out of town, but much prefer in-person. Getting them set up could be challenging, some think covid is no big deal and want in-person, refusing VV. Others are hesitant to download zoom and do VV.
20. Offered it before for parents out of state, web-based. Gonna keep using it as we transition back to in-person. Use when Caregiver may be high risk with health issues, so in person not good. Definitely cutting down on no-shows, but it still takes a reschedule because kid might not be in right place. If you want a quick switch to VV, we'd ask why? Where are you? On a break or really ready to visit?

Depending on age of child – for younger kids, in-person is better, They need to engage with their parent. Resuming in person, would encourage staff to wear masks, visiting families – optional? Working on a plan. Expecting high influx of summer visitors, so have a lot to consider.

21. Tough question, in-person probably preferred. There's good and bad in VV. Don't see it continuing solely, will go back to in-person. Some may have a covid fear and ask for VV to continue. It would be good as a permanent menu item. Many custodians are grandparents or elderly so if covid is a scare, VV might be best
There are tradeoffs to everything. You're almost responsible for more in VV, you have to constantly scan the whole room, so in-person in controlled environment are easier in some ways. You have more control in the facility.
22. Yes, definitely, for those that are far away, can alternate VV with in person to make driving easier. Switching all orientation to VV instead of in office – keeps traffic out of office, can do it all at once – all CPs etc. Don't need a big conference room for that. Will go by the judge's order but we are adding it to the menu and let the judge decide – maybe they'll feel some not ready for VV. It's now another tool in our toolbox. For those long distance, could only do 1 a month, now they can do more with VV. Plan to help educate judges on the VV options, which they're good for, which not, and ask for this option to be considered in orders. Overall it's been a great experience, seeing how happy kids were to see parents, so glad it was an option over the quarantine.
23. **Yes definitely but need to decide how or when appropriate. Ex: traveling, out of state, holiday weeks, transportation, illness, hurricanes or weather, safety concerns, illness. Best as an enhanced option, additional option. Need in person visits to prepare for the next step, ensure they're ready. It's not a parenting solution – they need in-person experience. Re: VV lessening no-shows, cancellations – not sure... the disorganized parents will still be so. You can tell which parents are inconsistent whether in person or VV.**
Glad that the circuit has made an effort to make VV possible. It was crucial to keeping visits going during pandemic. SV is often looked at as a punishment, but there is more value to it than that. It's a connection tool, a safe one that can be used to transition families to a healthier together time. SV and VV can help families come together safely in increments. For instance, suddenly expecting a child to do an overnight with a parent they don't have much experience with can be scary. Moving gradually to that through VV first, then in house SV, then onto other options. It can be a useful tool, not just punitive.
24. Would like to. It has definitely cut down on travel, makes families more accessible but done in combination, kids who are in licensed care, pre-adoptive homes where we know caregivers are responsible.
25. Yes, but zoom is only a substitute, not long term. In person is so much better. Easier to get 4 kids on different placements together VV rather than in-person. Useful for out of state people, far away visitors, etc. Trying to schedule both options is complicated. Overall it's been a great tool for this strange time, but most are over zoom and want to meet in person. Hard to keep a group of kids focused if they are different ages. Would like to have VV provisions in all future court orders as appropriate. Would prefer in-person, would use them

in certain cases. Will not offer as a regular service because people might take it as the easy way. We have about 100 cases and 1,200 per year with waiting lists. Rescheduling is hard for in-person because they have a tight schedule so maybe a VV if cancellation is really necessary. It's a great option, glad we have it, but don't see it as an ongoing staple of the industry, in-person is better for kids. But nice for occasional real life visits – see her riding a bike, seeing real home life. Good when it's good but can go bad too quickly, hard to control. Sometimes seeing home life brings triggers.

When returning – there are covid worries. Bringing own toys could add triggers we don't know about. Still unsure about when going back to in-person and what procedure will be. A lot more restrictions because they're in a court building.

What are Some Examples of Unexpected Scenarios You've Experienced?

1. These three months have felt like a year. Of course there's times when caregivers and parents aren't getting along but now they have to cooperate more. Keeping positivity and appreciation in the forefront. Monitors went out of their way to send everyone mother's day wishes, helped a kid "blow" out a virtual candle for b-day. Trying to keep a controlled environment was tough – people inappropriately dressed, other people in room, etc.
2. Smoking, child went to bathroom, no shirt, sometimes people too comfortable, Custodial parents being able to hear the visits was sometimes a problem, sometimes they're in the room out of sight.
3. Parents got to ask caregivers questions which was nice, they were working together for the kids. Normally the parents are resentful of the FPs but VV helped them appreciate them more.
4. In labor on a zoom visit, one went to bathroom, while shopping, or driving. They sign a contract on procedures so they can end visits like this. You have to be present and attentive.
5. Me and staff – learned how amazing my staff is – so resilient, able to adjust quickly, persevered. Didn't complain, took advice and suggestions, bouncing ideas off each other, sharing resources. Couldn't ask for a better team
6. Calls from homes – unexpected people wandering into the video, trying to get other parent not to talk when child was visiting with one parent. Sometimes bad they had to stop in the middle of a great visits at 40 min limit. People answering at stores, can't show them the house or "room they'll be in". Sometimes they got to see how good the other parent was with the kids, so some warming.
7. Some parents answer while driving, smoking, sometimes not taking it as seriously as they would a real visit – overly comfortable Some enjoyed just watching their babies playing, eating, etc.
8. No not really. I was very clear up front about expectations. They did very well. After a while, the child didn't want to use earpods since no one else was in the room.
9. The agency that gives them their referrals decided not to use her agency for VV and instead just allowed the Visitors and Custodians to arrange calls between themselves. Now

that they are returning to in-person, she hopes they don't decide to keep it all in house from now on.

10. Answering calls in wrong places like driving and with others in the car (lots of low functioning parents, substance abuse, etc.) Calling from their bed, laying in bed in the dark, talking not looking. Need to plan and prepare for the visit, not just hop on from anywhere. Tech problems – freezing and audio problems can be frustrating, one bi-polar girls especially disturbed by this.
11. Parents' boyfriends/girlfriends showing up in video. Grandma got to see the child play the piano.
12. Mom wearing a FUCK t-shirt on, grabbing a cigarette, dad hat with SHIT embroidered.
13. Seeing your partner in action with your child made them kinder to each other. They benefited seeing positive interactions. Forced custodial parents to realize how important seeing the other parent was. They felt safe with the VV and were more willing and open to it. One mom was coercing kids to end visit early. Kids required to use headphones. So we had to have conversations with mom – we see you, we're noting it. We want this to go well, so stop. Did one kid at a time instead, each boy had his own time and the other 2 kept mom busy.
One mom wouldn't let dad see kids before he went to Australia to help with fires. She wanted to punish him. He just wanted to say he loved them before he left. The monitor passed messages between the dad and kids who were kept in the car by mom. Dad had wanted VV while in Australia but we were unprepared to offer it then. Sadly, dad died in Australia helping to fight the fires. So sad for all involved. We're very prepared now.
14. Worried that 3 year olds would be a problem but dad came prepared, had toys, alphabet cards, mom put he in a stroller to keep there. Went well! Technical problems, feel guilty if it's on out end.
15. Some tech issues, some not in proper place for visits, some taking them too casually and not a serious visit.
16. Answering in wrong places, parents running very late, could tell caregiver was in room or was seen in the room, dad had a beer.
17. Groups with tech difficulties, real time troubleshooting, people not connecting, too comfortable
18. One father committed suicide, daughter wouldn't visit because she didn't want online visits, was angry, now feeling super guilty. Sometimes a parent isn't on time and ready = frustrating. Dad stalker used IMO app to track the mom, started calls without the monitors – now he gets no visits Mom had a John come up while she was on the visit A lot of parents out shopping or at work, not taking it seriously, having people not supposed to be there saying Hi – loss of control over the visit. One mom doesn't want to restart in person – she's also not doing VV, on Steve Harvey show, witness protection kind of In seclusion
Only open on Saturdays for in-person for Family Law. Clients saying they “can't visit because of lockdown” which is not true, people using it as an excuse to keep kids away from each other in Family law cases – Playing games. Often refusing each other contact and claiming Covid.

19. No because she would set up the call in advance, make sure all is good, then add the kids.
20. Even though I went through virtual rules and guidelines. Parents trying to drive at the same time, talk while in the store, no smoking. Even some caregiver are in a store, driving, etc. And they need to be at home and prepared. Not on the fly. Great rule – no one else in visit! Sometimes the kids are having fun in the caregiver home and don't participate as well and parents feel sad that their kids don't miss them. We have to explain that's not it, and it just means they're healthy and happy. Be happy for them.
21. Those with restraining orders, kids talking from the backseat of the car, (mom pulled over) People entering call when shouldn't, parents showing the house, or say hi to this person here!" Sometimes positive when parent can see them in home, activities and games available, can read favorite books.
22. Teenagers who wanted to tell off noncustodial mom and not follow rules, custodians listening in on conversations, mom in a bikini and high heels trying to make dad jealous, some laying in bed, dressed too comfortably.
23. Technology issues like people popping into the video, people using the technology to contact during other times = not appropriate, showing up at wrong time, people running late, not on time. Parents taking calls while driving, in stores, jogging in the park, etc. Not being ready wit tools and toys – go to the dollar store -can't blame the other parent. Routine issues, nothing extreme
24. Nothing unusual, just tech problems, screen freezing
25. Mom custodian with DV doesn't want to be facilitator but has to, he says coded things to her or about her, abuser sees her whole house. I'm not too comfy about bringing my work home – having clients see my den. There's nothing specific, but kind of eerie to have them in my home – prefer to leave my work at the office Some softening and appreciation for the custodians is seen, nice. Although trying not to engage custodians who are not comfy with that. Mom showing kids the dog in the yard and kids saw uncle's car –“Oh he's out of jail now?” Also, seeing homes could be a trigger if sexual or other abuse has happened in that home. That's why we don't let them bring games or toys from home – could be triggers or signals we don't know about.

What Have You Learned During this Process?

1. A reminder that our clients don't always have access to technology like we do. Reminding about the importance of being trauma-informed and meeting client need. Also reminds us to keep really good communication between all, not just a visit.
2. Proper way to pronounce names! Seeing into their world, living rooms. Things we didn't think of when creating protocols such as no smoking, had to be updated.
3. A lot! Personal opinion – VV had a positive impact on families because they are united more, more access to their lives in their homes. Felt more connected than just a visit in the center. More interaction. We can now work from home and make it happen which is good for all.
4. That people can really adapt in a crisis. Never thought parenting classes could be done well online. Never thought court could be done online but it works! So we've been forced to learned it wasn't so bad. Reduced no-shows and cancellations.
5. Me and staff – learned how amazing my staff is – so resilient, able to adjust quickly, persevered. Didn't complain, took advice and suggestions, bouncing ideas off each other, sharing resources. Couldn't ask for a better team
6. People really want to see their kids and this has been easier and more cost effective. Helped people see if their kids would be receptive first, learned we should be flexible with the clients. Were able to accommodate quick requests - like "I have a lunch break in an hour, can we do a call?"
7. Seeing parents suffer, miss kids is hard. But seeing how resilient they were was good. Sometimes it made the parents and custodians closer, were able to ask custodians questions about their kids, etc. Less cancellations and no-shows
8. Really feel she is ready for client needs and to offer more options. Really better at VV now as an option. Don't have a big problem with cancellations and no-shows in general.
9. The agency that gives them their referrals decided not to use her agency for VV and instead just allowed the Visitors and Custodians to arrange calls between themselves. Now that they are returning to in-person, she hopes they don't decide to keep it all in house from now on.
10. One benefit is that so many wouldn't get to visit otherwise. One parent with knee surgery can now visit from home. Some call scheduling is easier, getting several kids together at once is easier. But if they're committed, they are there either way. Seeing kids in-home give you insight you wouldn't have otherwise. You can spot somethings such as if mom has nothing nice to say about dad, but you can see different in VV from home so that's interesting to know. On the other hand, can also confirm things for you. In home environment is good to see.
11. How adaptable everyone is and that there are other ways of doing SV we didn't think of. We see possibilities in this.
12. Miss touching the kids, their hair, kisses. Their center has cases for 8 weeks, to teach parenting, to help with bonding, to teach healthy interactions, healthy food, etc.
13. How resilient the staff and they system has been to this crisis. Clearinghouse immediately started getting us info. Families were resilient to changes and cooperative, grateful. It's been a positive experience.

14. You have to be creative and flexible with heartbroken families who really want to be with there kids. Be understanding.
15. Good is that I learned about cash app, we now know we can do things online like anger management, BP and other services – now a new service option. We can no accommodate people more, out of towners, etc. Negative – visits are tough in general because many angry clients, unhappy with the courts, etc. Adding new constraints has been unwelcome and they suffer the brunt of frustrations. There is actually MORE work in many ways with VV (some agencies want to lower the payment because it's just VV) You really have to monitor an watch so much more for red flags. We've had to learn to get "a feel" for good and bad environments – easier in person than in VV. Caregivers don't want an invasion of privacy like this.
16. Engagement has increased dramatically. With s many excuses eliminated, more visits and participation. Toddlers much better in the mornings. Definitely cuts down on no shows and cancellations, easier to make up a missed visit.
17. A majority of our clients preferred Vv and so seamless transition. Overall, it's been reinforced that the way we've always done things isn't necessarily the only way to do things,. There can be another way. Can fill gaps well with technology. Courts will hopefully include VV options. Not only are VV possible but beneficial
18. What have you learned during this process? This is not appropriate for bonding because there's no touch. Don't think it should stay this way. Some CBCs want to keep it this way. Saves a lot of drive time according to upper mgmt. We have suffered financially because we haven't had as many cases. Lots of Case Managers are doing it themselves, some Foster Parents are doing it themselves too. VV until July 2nd order?? Most foster parents don't want to see biological parents in person. Family support workers usually pick up kids for real visits.
19. Relationships between parents and caregivers is better than before because they finally can talk and answer questions
20. Even though we say we weren't ready for it, it got a lot easier with help from Clearinghouse. Helped us be prepared and professional. It is a good working alternative. Parents that didn't come before are visiting now because it's easier.
21. You gotta be flexible on your process and go with the flow. Lower the expectations, things will come up, adapt. A lot to watch in a space that isn't yours and controlled – gotta spot flags
22. Have a lot of patience. Go with the flow. If things aren't working, keep trying. Thought it wouldn't work but it actually did. We can learn new things if we set our minds to it. Custodial parents seemed even more eager to start VV than visitors
23. VV has really promoted the co-parenting process. This has forced both parents to engage more, they are actively seeing and remembering there is another parent they need to work with. Especially in no-contact ordered cases, they now have to cooperate. It has opened their eyes to the other parents' contributions. Parents are cooperating more to help other parent have a more positive visit, giving advice on the things the kids like, etc. During all the stress of covid, at least families got to still see each other. I've learned

training tools to help my monitors create more positive visits, remaining neutral, great VV training guidelines and tools

24. Like seeing them in person

25. A lot less control over who is in the room. Tried to login early to get tech straight. But sometimes tech is a big problem – monitor got kicked off a call and called mom to tell her, turns out dad and kid were still talking unmonitored. Overall it's been a great tool for this strange time, but most are over zoom and want to meet in person. It's been stressful -easy to do but mentally hard to walk away from when working from home – hard to leave the issues at work. Learned a lot about technology and social media. Some softening and appreciation for the custodians is seen, nice. Although trying not to engage custodians who are not comfy with that.

What was the Reaction from Your Clients?

How was the Transition for Children?

1. Client Reaction: Had to figure it out immediately! Worked with IT to ensure HIPPA compliant, used zoom, skype and google duo, but skype was harder, used zoom most. But sometimes caregivers didn't like their info being shown so they like skype (can hide identity and e-mail) no in-house training were thrown in very quickly, once info came from Karen, it was shared with staff at zoom staff meeting. Each case manager had to schedule their own visits.

How was the transition for the children? Were they comfortable? Dependent case to case and by age. Some were too young to use the VV well, some really missed the personal contact when it was time to hang up. Older kids better at it, but not really motivated to do a whole session. So most looking forward to return to in person.

2. Mixed but mostly open minded, overall they were good with the technology, but for a few individuals we had to do training, mainly older clients. Did do practice calls. Had to do orientation to review protocols and policies, and ground rules for VV had to do that before first call, acknowledge and agree to them as well. All before first visit.

How was the transition for the children? Were they comfortable? Very comfortable -the kids loved it, took to it without a thought. They liked being on the screen, center of attention. Even babies and toddlers did well, but it hinged on other parents' preparedness. Big difference between parents who planned and prepared rather than just handing phone to kids. After a not so good call, we'd call parents and review, give ideas.

3. Caregivers seemed to need more help but once they did it a couple times, the clients were fine. Some longer visits were split into a few smaller visits, which also gave families practice. Some parents refused at first because they thought it would pass quickly, but once they realized this was long term, we convinced them to try it. Only a small minority really. Lots of them actually enjoyed it because of seeing kids in their daily routines, eating, in a home environment, see their rooms, etc was very good. They also got to see where they were and how the caregivers were doing with their kids. Because visits were easier, they actually got more visits in than usual.

How was the transition for the children? Were they comfortable? Most of them didn't want to visit as long via video. Hard to engage them for a long period, so we made a few shorter calls instead. Babies were distracted. Preferred in-person it seems but glad they got to see them more often.

4. At first they thought it was nuts, but when they realized it works well to their surprise, better than nothing, kids actually did well and lasted long on the calls, technology frustrating at first, but now good. Lots of training, lots of practice. Called them 15 mins in advance to get it set up

How was the transition for the children? Were they comfortable? Great, they had no issues, tried ear buds for privacy but they didn't like it, so we've laxed on that. Younger kids didn't want to go that long but they did at least 40 mins. Parents wanted a cheaper price since it was zoom, but they said no.

5. Mixed reaction. Wide spectrum from what, I can't see my kids??!! To those who thought covid was no big deal, won't hurt us. But others were all in from the get go. Unexpected surprise – at least 3 visits where they had excessive no shows in person, but are there regularly with zoom. Visits are better with parents who are prepared for the visit

How was the transition for the children? Were they comfortable? Also have girl who's been hesitant in-person, but like zoom and was much more willing to VV with mom. Amazing differences, their visits have been fabulous, more comfortable so talking more, engaging more. More comfortable in the VV.. Other kids - not one has complained. Some are really excelling, have great ideas for fun on the call. When you don't have preparation, kids can run wild, especially with 3 kids at a time on a call. Sometimes have to put one in the waiting room while others visit.

6. Ok with it, especially new clients. Glad to see them at all, good first start in many cases. Did tech prep and test calls with the clients to prepare them so time wasn't wasted during visits

How was the transition for the children? Were they comfortable? They adapted well, especially big ones. Tougher to get little ones engaged. Used our suggestions for kids – getting them ready with toys and stuff, keep them in a highchair or carseat to keep them from wandering off.

7. At first they were sad because they couldn't see kids, but then realized VV was better than not seeing them and enjoyed it more than they thought. Now all are used to it. But now, getting anxious to see the kids. Overall positive. Some had trouble with technology, especially the older staff and clients

How was the transition for the children? Were they comfortable? Some were babies so didn't understand, older ones it was a process but glad to see their parents. Some parents were better at it, made it fun, more prepared. Some parents weren't as good at making it fun as others. Teenagers didn't seem to want to be on phone that long.

8. Some already knew zoom, others needed some teaching, just happy to stay in touch with each other, If they have the kids' best interest at heart, they are happy to cooperate
How was the transition for the children? Were they comfortable? Very tech savvy – picked it up easily

9. **Hope to find out if we get the case notes eventually!**
10. **They were not happy at all. Some understood and accepted it more. But some resented not being able to see their kids, mostly those with substance abuse issues, looking for reasons to complain.**
How was the transition for the children? Were they comfortable? For the most part yes but depends on ages. Older kids did better. Kids seemed to understand why this was being used, it worked best with a computer if available.
11. **Dependency cases understood, civil and family law were upset – they require payment up front and so just closed it down. Sent letters a week in advance to them notifying closing. Invited to find other sources, many did that. At first clients had tech problems, some did audio only, but now most have adapted to zoom.**
How was the transition for the children? Were they comfortable? It was a transition for kids, still a struggle for young kids and requires more hand on with young ones, which means FP has to help. Kids have adapted.
12. **Most not happy but understanding. Used a lot of empathy.**
How was the transition for the children? Kids weren't very excited about it. Were they comfortable? Kids seemed to engage less when virtual. Asking 'is it over yet?' but they sometimes get restless and bored, because it feels artificial, not a real interaction. Babies had trouble. Kids can have trouble holding phone or looking at JUST that.
13. **At first, not surprised they had to close. They were sad, but understood. Took 2 weeks closed to organize and prepare. When they started up with VV they were very happy to see their kids. They were all cooperative.**
How was the transition for the children? Were they comfortable? Adapted well – some visits even better in video than in-person, more focused. Elementary – middle school kids focused well on VV. Little ones = harder to focus, shorter visits.
14. **They were fine. Good response, been going well. Mostly short visits, hour at most.**
How was the transition for the children? Were they comfortable? Yes! Teenagers great, parents have been creative, art, etc.
15. **Most didn't understand at first why we had to do this, lots of misinformation on covid so they were not happy. They want face to face with kids. Having to contend with that. Lots of providers don't want their homes on the video, feeling a little invaded or violated.**
How was the transition for the children? Were they comfortable? Older kids talking 60-90 mins and are ok Younger kids scheduled length according to age and ability to focus. They seemed better, very tech savvy, already familiar with VV with friends.
16. **Mixed some were relieved to have the opportunity, others totally against participating – they wanted to see their kids face to face but they knew it was a court order, so they understood. Tech training was a process, got the hang pretty quickly.**
How was the transition for the children? Were they comfortable? Yes for the most part. They're like a fish in water – easy for them, Loved being the center of attention, showing home, artwork, and school work. Hardest on toddlers, where you pretty much just watched them play. Having monitor mute video was great – more natural visit for parents. Depends on child how well calls went, old and young, shy vs extroverts, parents ability to entertain and relate.

17. They were genuinely on board. They wanted to make sure their family wasn't at risk. We've seen increased engagement in all our programs. Much fewer cancellations and no -shows, they like the more flexible schedule for VV.
How was the transition for the children? Were they comfortable? They handled it as well as can be. Can be stir crazy, have energy to burn. Not always understanding why they change. But different age groups handle it differently. Older kids, this is totally in their wheelhouse. They have more buy in now! Younger kids more challenging. Little kids want more interaction. Better prepared parents had better visits. We provided coaching and ideas on what to do on a VV that's fun. Shared ideas with each other to pass on to cases. Also share ideas and suggestions with parents.
18. No issues, grateful to visit, family support network DCF workers scrambling to do 4 1 hour visits, she did 1 four hour slot, but kids wouldn't stay on that long. So we gave them their 4 hour slot and would try to call back after breaks. Foster parents have been great trying to help kids participate.
How was the transition for the children? Were they comfortable? Younger kids do better, babies sit in high chair and eat, teens not as well – they get impatient. One does flashcards, one watches movies together.
19. Missed touching their kids, but understood. Some angry parents but mostly ok. Did pretty good with tech, some had to learn but ok.
How was the transition for the children? Were they comfortable? Most kids are babies and toddlers so became just parents watching babies play.
20. New families were glad because they hadn't seen kids in almost 2 months so glad to see them in any way. Current cases were not happy. Had technical difficulties and didn't do as well with VV. Almost all eager to return to in person visits.
How was the transition for the children? Kids seemed happy just to see parents. But were impatient with the phone. Wanted to end early. Tired of online school and wanted to go out. But did like seeing their siblings in other places. Sometimes timing was hard because parents working from home. Were they comfortable? Sometimes, shorter visits better. Older kids longer.
21. Challenging for some, but after 1st visits, few problems. Some custodial parents didn't want video on their house, only audio. Didn't like other parent listening in. A mixed bag – some were good, some were bad. Lots of family law clients dropped off, some came back when they realized it was going to be long term. New clients all VV – very accepting.
How was the transition for the children? Were they comfortable? Younger more challenging, keeping them focused can be tough. Mostly I would say so. Better than parents.
22. They were grateful that this was offered. Some had to get used to tech of course, but once they did a call, they were fine,
How was the transition for the children? Were they comfortable? Pretty good, younger ones were harder, get antsy on longer calls. Look forward to their visits
23. Overall positive, not negative, cooperative. Biggest problem was getting technology learned and schedules set.

How was the transition for the children? If the kids were school aged, it was easy because they were used to the new online school but if they were much younger, it was tougher. Had to find new ways to entertain the youngest ones to connect Were they comfortable? Case dependent, some yes, some no, but at least it was continuing contact of some sort, contact not interrupted is important.

24. Kids loved it , parents indifferent kids got phones! LOL Older people struggling
How was the transition for the children? Were they comfortable? All good – just like school.
25. Most of them were ok – they just want to see their kids. Some were not happy that they had to go from 2 hours visits to 30 mins or 1 hour at most. Many had trouble finding a place to be alone for a call because they have multiple people in the home. Court orders only some people to be there. Some had tech problems, low income issues.
How was the transition for the children? Were they comfortable? Good – they’re tech savvy. Some younger ones hard to stay focused. Hard to keep a group of kids focused if they are different ages.