



No CONTACT VISITATION PLAN

CHILD PROTECTIVE SERVICES - PERMANENCY AND CONSERVATORSHIP

THIS PLAN IS TO BE USED WHEN CONTACT OR VISITATION IS NOT APPROVED BETWEEN THE CHILD AND PARENT

Purpose: This form documents the visitation schedule that the caseworker has developed with the parents.

Instructions: This form may only be completed by Conservatorship (CVS) staff.

Directions: Conservatorship (CVS) staff document the responses to each question below and provide the parent with the Visitation Expectations Document. Once completed, the worker obtains signatures, makes copies, gives the parents a copy and files the original in the case record. For additional information on constructing a visitation plan, see the Child and Family Visitation Best Practice Guide.

Cause No:	
Case Name:	
Children	
Indicate whether the court or DFPS restricted the visitation or contact	<input type="checkbox"/> Court ordered <input type="checkbox"/> DFPS recommended
Indicate why it is not in the child's best interest for contact or visitation to occur.	
Specify what needs to occur in order for contact or visitation to begin.	
What supportive adults can the child have contact with or visit with?	
Planning for future: Additional Supportive Adults. (List any adults that the parent would like CPS to	

consider to supervise visitation and aid in transportation once visits are allowed.)	
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I participated in the development of this plan and understand the plan as written. This plan will be reviewed on _____ or no later than 30 days from the date of signing. At any time, the parent can request a review of this plan.

Parent Signature: _____ **Date:** _____

Parent Signature: _____ **Date:** _____

Caseworker Signature: _____ **Date:** _____

Program Director Signature: _____ **Date:** _____

(The Program Director's signature is only required if restriction is at the recommendation of DFPS)