# CASE MANAGEMENT STEPS - JOB AIDS

March 2020



Association of Religious in Uganda Catholic Care for Children in Uganda

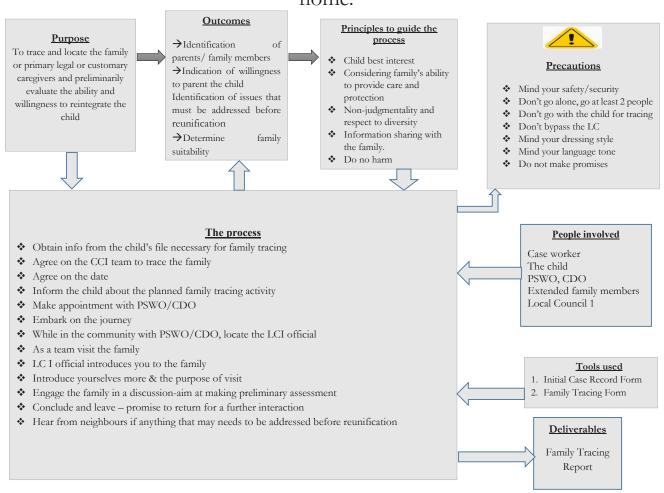
### Job aids

Job aids are tools or diagrams in form of instruction cards and wall charts that provide a brief summary of instructions to help a person (case worker):

- Remember what to do;
- Be sure that they have completed all steps required;
- Reduce avoidable mistakes;
- Quickly access the information needed to perform a task.

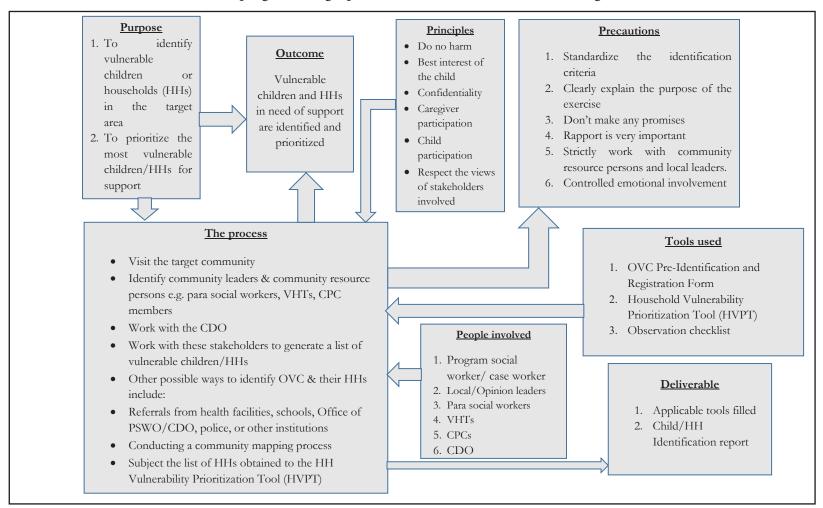
### Family tracing:

Refers to the process of identifying a child's family and other related information helpful to better understand where the child came from. This includes visits to a family home and community for purpose of (re)building a relationship and exploring the possibility of placing the child within the home.



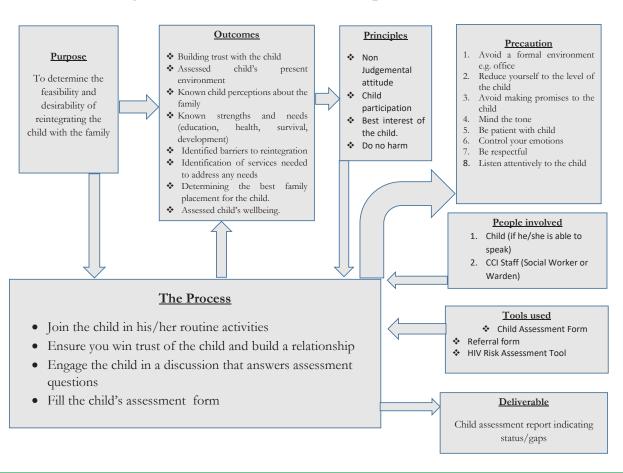
### Case Identification and Prioritization

Refers to the process of identifying vulnerable children and their households that need external support from OVC programmes or services in order to become resilient and progress along a path towards sustainable self-well-being (MoGLSD CM SOPs, 2019).



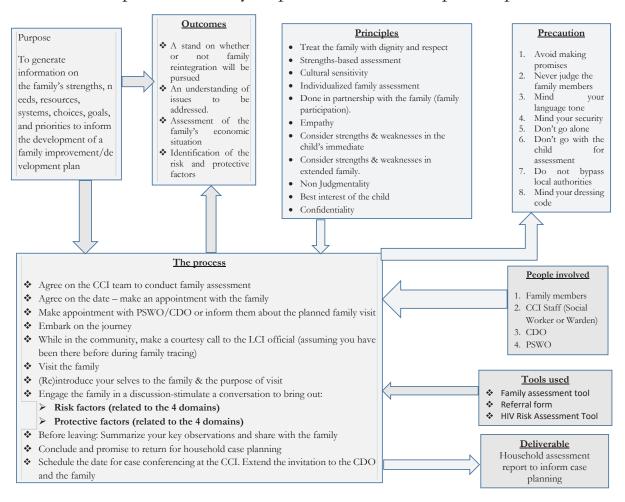
# Child Assessment/Profiling

Child assessment is a process of gathering information about the child, reviewing the information, and then using the information to plan, identify specific needs and strengths/resources of a child or family. Child Profiling/assessments can explore issues related to socio-economic status, health, HIV, status, psycho-social wellbeing, education, nutrition, and protection that affect the child.



### Family assessment

It is a process designed to gain a greater understanding of family's strengths, needs, and resources and how these affect a child's safety, permanency, and well-being. The assessment provide the foundation upon the family improvement/development plan is based.



Examples of risk factors	Examples of protective factors
<ul> <li>♣ Parental depression</li> <li>♣ Substance and alcohol abuse</li> <li>♣ Family/domestic violence</li> <li>♣ History of childhood abuse</li> <li>♣ Mental ill-health</li> <li>♣ Orphanhood</li> <li>♣ Ignorance about children's rights and what constitutes abuse</li> <li>♣ Household economic vulnerability</li> <li>♣ Sickly adult caregiver</li> <li>♣ Elderly adult caregiver</li> <li>♣ Single parenthood</li> </ul>	<ul> <li>✓ Life skills among children e.g. relational skills, critical thinking and critical decision making skills</li> <li>✓ Positive parenting skills on the part of caregivers</li> <li>✓ Economic wellbeing of the family</li> <li>✓ Family stability-violence free</li> <li>✓ Conducive and supportive school environment</li> <li>✓ Child knowledgeable about his or her rights and what constitutes abuse</li> </ul>

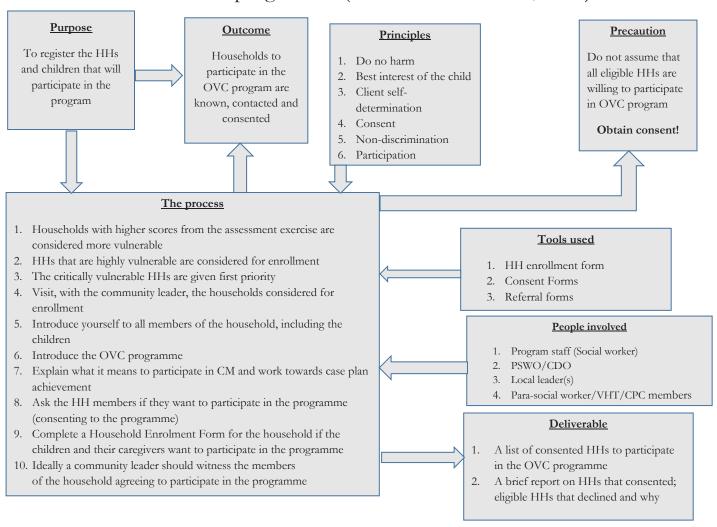
### Sample of guiding (assessment) questions

#### Source: Sharon L. Johnson (2013). Resources. In Therapist's Guide to Pediatric Affect and Behavior Regulation, 2013

- ✓ Are there safety and protection issues that must be addressed?
- ✓ What are the relative strengths and weaknesses of the family?
- ✓ What are the family's needs?
- ✓ Can the family meet the needs of the child?
- ✓ What are the resources available to the family (extended family, church, community, etc.)?
- ✓ Is the family competent to provide for basic needs?
- ✓ Do the parents/caregivers have the ability to manage problem behaviors in age-appropriate ways without any safety risks?
- ✓ Is there any evidence of multigenerational patterns of abuse or neglect, substance abuse, etc.?
- ✓ Parental/caretaker ability to empathize?
- ✓ Parental/caretaker ability to nurture?
- ✓ What resources have been helpful to this family system in the past?
- ✓ How does this family system cope with stress and crises?

### **Enrollment**

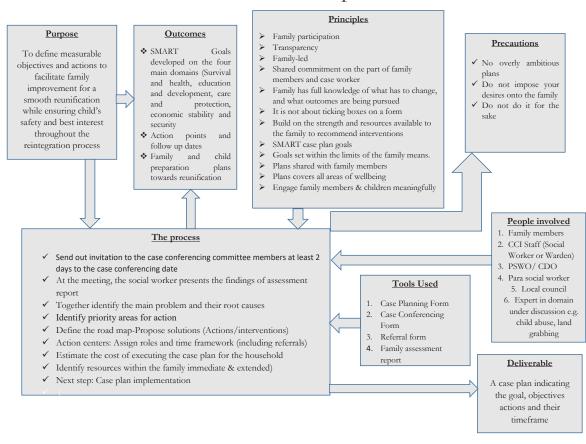
The process of registering children and households that are eligible for and want to participate in the OVC programme (MoGLSD CM SOPs, 2019).



### Household case planning

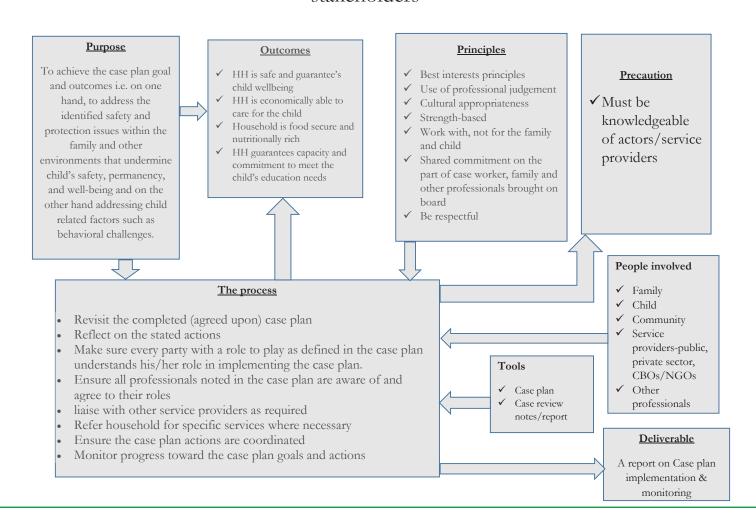
The process of creating a written plan that outlines how to improve the wellbeing and safety of a household and increase it resilience. It includes developing goals, objectives and activities that have be undertaken.

Assessment information collected must be used in a focused way to address the family's identified needs in the household case plan.



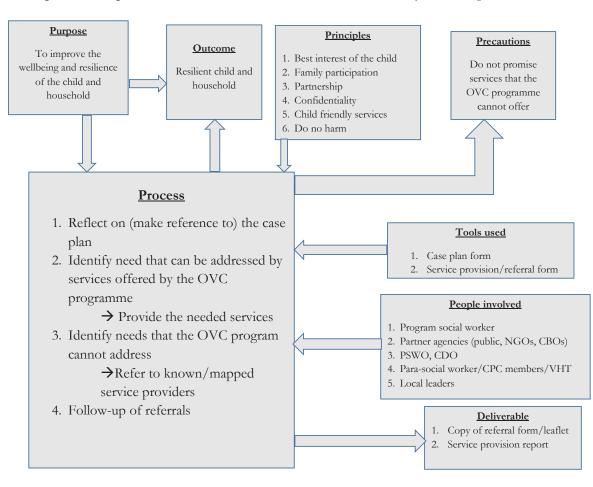
# Case Plan Implementation and Monitoring

This involves acting upon the case plan completed with the child, family members and other stakeholders



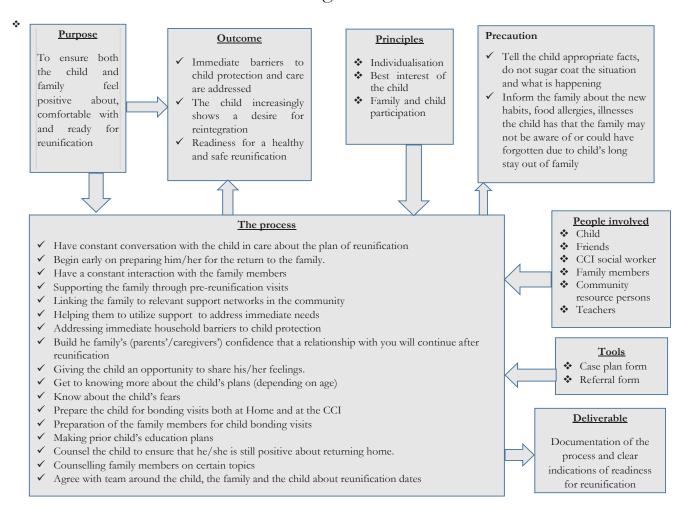
# Direct service provision and referral

This step involves the Case Worker acting upon/coordinating actions in the case plan that he/she has developed with the caregiver and the child or the case conferencing committee (for the complex cases). Specifically, the Case/Social Worker determines the needs that the child and caregiver cannot address on their own and which programme services will be provided either directly or through referral. For services provided to the child and caregiver through referral, the case worker makes the necessary follow up (MoGLSD CM SOPs, 2019).



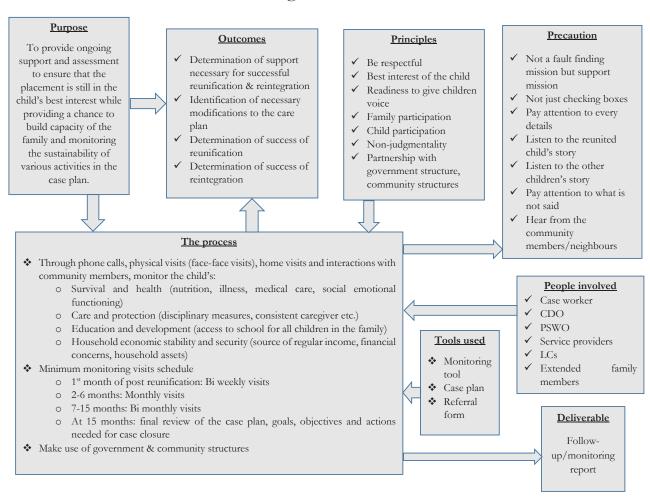
# Child and Family Preparation

The process of helping the child and family consider the various aspects of reunification and eventual reintegration.



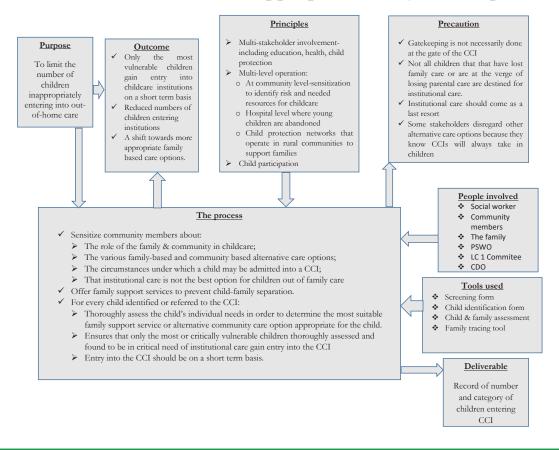
# Post Placement Follow-Up/Monitoring

The process of assessing whether or not the child is fitting into the family, is accepted, is obtaining the needed care and protection as well as watching out for any signs of failed reintegration and addressing them in time.



# Gate Keeping

Gate keeping is a process of involves preventing the unnecessary entry of a child into the care system and ensuring that only the most vulnerable children gain entry into childcare institutions on a short term basis. Gatekeeping diverts children from unnecessary initial entry into alternative care, and reducing the numbers of children entering institutions. It supports a process of deinstitutionalisation and a shift towards more appropriate family based options.

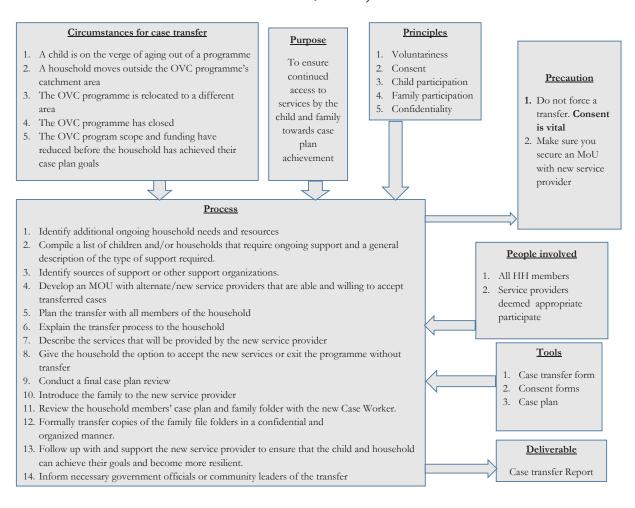




Case closure, Transfer or Attrition

### Case transfer

Case Transfer is the process of supporting the movement of a child and/or household from active participation in a the OVC programme to another source of case management support (MoGLSD CM SOPs, 2019)



### Attrition

his is the premature termination of support to a child and/or household due to circumstances beyond the control of the OVC programme (MoGLSD CM SOPs, 2019).

#### Circumstances for Attrition

- The child and/or household requests to no longer participate in the OVC programme
- 2. The programme is unable to locate the child and/or household
- 3. The child dies

#### **Principles**

- Respectful of family decision
- 2. Non-judgemental
- 3. Consent (by caregiver or HH affirming the household's withdraw

#### Precaution

Do not rush to write off the child/family from the programme

#### **Process**

- 1. In the case of refusal by child/HH to continue in the OVC programme:
  - a. Meet with members of the household to find out why
  - b. Try to reach an agreement to continue services.
  - c. If no agreement, close the case
  - d. Documenting the reason for attrition
  - e. Request the head of the household sign a form to signify his/her consent to withdraw.
- 2. In the case of inability to locate a child or household:
  - a. Consult with neighbours, family, and friends for a period of at least two months (with a purpose of locating the family)
  - b. Make multiple attempts to locate the household
  - c. Document all the attempts to locate a child/HH
- 3. In the case of child death:
  - a. Obtain a copy of the death certificate from a governmental or nongovernmental health facility
  - b. If there is no death certificate, confirm the death through multiple sources, including neighbours, family, and friends.
  - c. Connect the household with support services such as grief counselling
  - d. Consider meeting with the family for a few weeks to provide additional psychosocial support.
  - e. Close the case

#### People involved

- 1. Family members
- 2. Neighbours
- 3. Local leaders
- 4. Police
- 5. CDO/PSWO
- 6. Health workers

#### Tools used

- 1. Case planning tool
- 2. Case closure tool

#### **Deliverables**

A case closure report detailing circumstances under which attrition occurred

### Case closure due to case plan achievement

#### Circumstances

- 1. Case plan goals have been achieved
- 2. Clear indication the family can live independently without programme support

#### **Principles**

Tools used

2. Case closure form

3. Monitoring tool

1. Case plan

- Controlled emotional involvement
- 2. Best interest of the child
- 3. Do no harm
- 4. Child participation
- 5. Family participation

#### Precautions

Case closure is a process, not an event. Along the way, keep preparing the child and family for case closure

Family bonding is key

#### **Process**

- 1. Conduct final case review
- 2. Inform the family and other stakeholders about date for case closure
- 3. Alert the family that the next visit will be the final visit to celebrate success
- 4. Provide telephone contact just in case of need for support in future
- 5. Provide a list service providers within community
- 6. On the day of closure, officially handover the family to the community-level stakeholders—Para-social workers, CDOs, local leaders

#### People involved

- . Local leaders
- 2. PSWO/CDO
- Para-social workers/CPC members
- 4. Service providers
- 5. Extended family members

#### **Deliverables**

- 1. Case summary
- 2. Case closure report





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