

CASE MANAGEMENT IN CHILD PROTECTION: METHODOLOGIES, ROLES AND PROCEDURES

Children in need of protection: the core target group for public services

Since the ratification of the Convention of the Rights of the Child, the Government of Sri Lanka has committed to increase the efforts to ensure and protect the rights of the child in every aspect of life. A special attention is given to children in need of care and protection, children in contact with the law and children with special needs.

For these children, public welfare services represent the service provider that provides necessary care, while being protected from forms of exploitation, violence and abuse. While assisting them, service providers commit to translate into practice the pact that the State implicitly signs with citizens, to ensure their protection and equal access to services. Vulnerable children can be assisted and protected only through the cooperation of all the services involved.

The key role of Probation and Child Care Services

In Sri Lanka Probation and Child Care Officers are the officers appointed to provide the primary child protection response to children; their full involvement from the first stages of the case management process has been recognized as essential to ensure the proper follow up for each case.

Their experience has been considered the most appropriate to contribute to the definition of a model of case management which should be shared with all the other service providers, ensuring in this way their full understanding and acceptance of the process.

Case management

Case management in the Department of Probation and Child Care Services is the central organizing process which ensures that each child receives the services required to maximize their capacity and opportunity to receive care and protection.

Principles of case management

The following principles are fundamental to case management practice:

- Recognize and establish the inherent dignity, importance and individuality of each child
- Children have a right to departmental services free from all forms of abuse and neglect

- Recognize the responsibilities involved in accepting the legal duty of care for children , particularly those in need and/or at risk
- Recognize the right of each child to have input at all levels into their case planning process
- The department encourage children to fully participate in all activities and programs that are provided or offered which will enhance their rehabilitation
- Give due recognition to the importance of the family in the life of the children, and encourage consultation with and involvement of the family wherever appropriate
- Recognize the need to work with children in a culturally appropriate way
- Strive the need for cooperation and consultation with government and non-government agencies which offer services to children
- While guidance and assistance to the children is our first priority, department is required to exercise direction and control when appropriate.

CASE MANAGEMENT PROCESS

Department should make sure;

- that children have rights and freedoms before the law equal to those enjoyed by adults and, in particular, a right to be heard, and a right to participate in the processes that lead to decisions that affect them;
- that children who commit offences bear responsibility for their actions but, because of their state of dependency and immaturity, require guidance and assistance;
- that it is desirable, wherever possible, to allow the education or employment of a child to proceed without interruption;
- that it is desirable, wherever possible, to allow a child to reside in his or her own home.

Case identification is done through

1. direct request by the child/ family/ legal representative
2. referral by another public or private service/ institution
3. written or telephonic notification by another individual

Reporting of a case to probation and first response to a case

Section 17 notice:

In terms of this procedure, Under the CYPO section 17, *Before a child or a young person is to be produced before the Court as a person who is in need of care and protection or as an offender the Officer in Charge of the police station should inform the relevant*

probation officer of the nature of the offence (in the case of an offender) or any other ground the child is being brought before Court (Eg: as a person who is in need of care and protection).

Children whether they are offenders or victims are anyway victims. Thus the legal assistance to the child in courts of law should be made available. The assistance from a PO should be compulsory

The implementation of this section has to be strengthened, for this purpose the Provincial Commissioners should build good relationship with the Police department. Both the Police department and the Probation department have to be made accountable for observing this procedural safeguard for children.

In order to facilitate the functioning of the section a 24 hour on call system for POs should be set up within the Probation Department. Facilities to set up the system have to develop. PO should be available 24 hours for everyday of the week.

Information received by the public should be documented on the relevant information book. If the information is insufficient document it in the information book to be further inquired in to.

Once the case is reported the PO should do the initial inquiry to prepare the interim report, to be submitted to court.

Emergency care for child:

Emergency care for the child will be given if required. If the child needs to be referred to a hospital for treatment or to the JMO for investigations, such steps should be taken. If referral to Police such steps to be taken

Provide a temporary place of safety for a child who needs shelter. Involving parents and ensuring unbroken contact with them – even where a temporary alternative placement is found are matters for which probation must take responsibility. All hospitals are considered such places and certain identified families.

Scheme of appointing suitable persons (Section 14 CYPO) in whose residences a child could be kept before being brought before Court should be re-activated. This will prevent children being kept in juvenile observation centers and adult remands as a temporary measure

Government Hospitals should be directed and supported to provide a safe refuge for these children in the Pediatric Ward.

Separate places of safety for victims and offenders should be identified and gazette by the respective provincial DPCCS.

Appointment of a case manager:

The following aspects to be considered

1. number of cases in his/ her responsibility
2. case complexity
3. experience
4. knowledge of the respective problem
5. relationship with the child and family
6. collaboration with the service and institution network

Appointing the case manager:

Case manager would differ according to the facts of each case.

For children in contact with the law the PO in that judicial division under the supervision of the POIC would become the case manager of that particular case.

For preventive cases the CRPO at divisional level should become the case manager of that case. He/ she should be appointed by the Divisional Secretary of that division.

For children in institutions the House Manager, Matron or Assistant Matron of that particular home will become the case manager. Warden or House Master of State homes would become the case manager of those institutionalized children. They would be appointed by the POIC of the area. House Manager, Warden, Matron or House Master should coordinate with the PO.

The Case Manager with case responsibility will:

- ⇒ Case managers have to make sure that everything possible is done to protect and provide care to vulnerable children; in a situation of crisis they should provide full attention to the child, and obtain the cooperation of others according to the child's needs;
- ⇒ Case managers should be the first ones responding to acute protection cases beyond the first aid provided; they should ensure the collection of reliable information while coordinating the protection response;
- ⇒ Case managers can delegate some of their functions to other identified resources (colleagues or identified NGOs, depending on the specific needs), but maintain the final and overall responsibility over the case; the involvement of other persons is never an excuse to justify a failure in the service provision;
- ⇒ Case managers should always act according to the best interest of the child, and ensure that other interventions are done in the same perspective; children often pay the price of situations of conflict among adults, or are penalized by the fact that they don't have the same capacity of the adults to advocate for their needs and rights; they should rely on case managers as their advocates;

- ⇒ Case managers identify and ensure the involvement and active participation of all the persons who can positively contribute to the solution of the child's problem
- ⇒ Case managers don't take decisions alone – to avoid the risk of bearing the entire responsibility of the case, which generally is a complex combination of various problems – but ensure that decisions are taken by the members of the coping network, and are implemented accordingly;
- ⇒ In order to ensure the involvement of more persons, and their full and sincere commitment, case managers need to develop good communication skills, and the capacity to stimulate the interest of the persons surrounding the child in contributing to the solution for the child's problem;
- ⇒ Case managers need also to mediate between various and often conflicting interests, ensuring the cooperation and information sharing of the members of the coping network, and constantly making sure that children's interest comes first;
- ⇒ Case managers need to listen, understand and support their clients; without being professional counselors, they need to develop the capacity to guide people in the understanding of their problems and the evaluation of possible solutions.

Detailed assessment

Assessment refers to a process of collecting, organizing and analyzing information in order to determine what action is required to address the needs of children

Assessment of the child's situation

PO should do the social inquiry utilizing **family assessment** tools.

The case manager should record the resume of discussions during meetings, date, place and purpose of the next meeting, previously agreed with the family and the child.

Assessment should include all information related to the child since his birth. Information can be gathered from the parents, relatives, government officers and others who can provide information.

Documents that are relevant to the child can be reviewed.

A **medical assessment** should be conducted to assess the health conditions of the child.

A **psycho social assessment** of the child has to be done by the PO.

All the information should be documented in the **Social Care Plan**

In **prevention cases** the CRPO should conduct the **family assessment**.

The PO may use the five family functioning domain areas (child behavior, family safety, family interactions, parental capabilities, and home environment) to provide a common lens through which to collect and analyze information concerning children and families.

Case work focusing children in contact with the law

Case work focusing children in contact with the law, requires that during the assessment of the child PO should assess as a priority, the patterns and situational factors that directly relates to the children's offending behavior. This involves undertaking a close analysis of the circumstances associated with the children's previous and current offending behavior. By conducting this analysis Department can be able to assist the children to understand their thoughts, feelings and behavior in high-risk situations. Offender focused casework does not exclude assessing the children's developmental needs; rather it has an emphasis upon addressing areas that contribute to offending behavior.

Social Inquiry should be conducted for children in contact with the law, children to be institutionalized and children already in institutions, but no Social inquiry has been done.

PO should get the assistance of the CRPO to conduct the assessment on their behalf.

For children in contact with the law, a court inquiry should be done, for the Hon. Magistrate to assess the situation of the child. At the inquiry the PO should produce facts of the case on behalf of the child.

If the institutional care seems to be the best option for a child in institution, an agreement should be made with the Home Manager and the family on the additional support provided to the child.

Assessment of the child's situation should be completed within 3 weeks.

Interim Report should be submitted to court either verbally or in writing by the PO if possible, as and when the child is produced in court.

Part reports from other districts should be sent within 4 weeks in order to complete the social inquiry.

In conducting family assessments the PO/CRPO should identify resources internal to the family.

- He/ She should use the least intrusive approaches and use flexible services.
- He/ she should be able to utilize family strengths and protective capacities.
- He/ she should listen to and acknowledge concerns of the family
- He /she should empower family with information.
- He /she should address immediate needs of family
- He/ she should build rapport with the family

Children in institutions should be assessed by the respective House Masters and Home Managers under the supervision on the PO.

Multidisciplinary intervention:

Case Conference refers to a meeting held either in the community or in custody, in order to ensure that the services required by children are organized appropriately and that all stakeholders are aware of their respective roles and responsibilities in the children's case plan. When the child is not present at the case conference it is then referred to as a case discussion. If the Child is not present it is important that participants in the case conference do not finalize decisions without the children being consulted unless otherwise the child is not in a position to be consulted.

For preventive cases:

It is important to conduct a **family group conference** by either the CRPO or the PO. FGC should be conducted to address the family of the child in order to prevent separation. Family, relatives of the child and the child should take part in this.

If a solution could not be sought through the FGC a placement committee should meet at POIC Unit level. The Committee should meet as a panel to discuss the best solution to the problem.

This should comprise of POIC, CRPO, School Principal, Public Health Midwife and Grama Niladarai.

CRPO or the PO should be the convener of this meeting.

CRPO could hold the committee in the Divisional Secretary's office.

If necessary a Samurdi Officer, WDO and other relevant officers who are able to provide livelihood assistance, psycho social support should be invited to be a part of the committee.

The committee should discuss the available facts of the case based on the assessment conducted on the child's situation. All possible solutions should be looked in to and the best solution should be sought with the agreement of the child and the family.

Except in an emergency, this Committee should meet every two week. All cases of prevention for the two weeks should be discussed at this committee.

If a solution cannot be sought by the Committee, the case should be referred to the Provincial Committee

The Provincial Committee should comprise of the Senior PO, other POICs, the provincial Commissioner and other relevant officers. The committee should meet at the Commissioners office.

For cases of **children in contact with the law**:

Cases should be separated to 02 categories as children in hospitals and children in the community.

Case conferences for **children in hospitals**, would include children who were abused.

Case conference for these children should be held in the hospital under the guidance of the Pediatrician.

PO would be the convener of the case conference while the Pediatrician would chair it. For this PO needs to have a good rapport with the Doctor.

The committee should comprise of JMO, Pediatrician, PO, CRPO, Police, NCPA Coordinator and the family of the child.

Except for emergency cases the committee should meet every 2 weeks to discuss the available cases.

The family should be made a part of the committee except for offending parents or relatives.

At the case conference all facts of the case should be discussed. The immediate needs of the child should be looked into. Based on the assessment of the child an appropriate remedy for the child should be considered.

For cases in the **community**, would include offending children's cases.

PO and other members identified above except doctors should take part in the case conference. The committee should meet at the POs office or a similar venue which is convenient to the members.

The child and the family should be made a part of the committee

Except for emergency cases the committee should meet every 2 weeks to discuss the available cases.

At the conference the child's past behavior, present state of mind should be considered. Remedies should be made accordingly.

For **children in institutions**, placement committees should be strengthened. Voluntary homes should hold the Placement committees under the supervision of the PO
Staff of the State homes should abide by the Department Standing orders issued to each Home. Placement committees and Licensing committees should be established and strengthened.

The family (or guardians) have to participate to the decision making process. Even in situations of emergency - and with the exclusion of those members of the family who could be (or have been) harmful to the child - it is extremely important to involve the family in the decision making process: their active participation, is the first step for the strengthening of their capacity to provide protection to their children – while on the contrary their passive acceptance of decisions taken by somebody else will further

weaken their capacity to exercise their judgment and provide autonomously for the care of children

Consider the involvement of the State Counsel in these committees. Consult the Magistrate as and when possible.

Case Review

Refers to a process involving officials of the department working with children and their supervisor. Reviews occur on a monthly basis to update a care planer to negotiate and recommend changes to a case plan. The review may include discussions about support structures, training and other assistance which may require offering a more effective service to the children.

Case reviews should be held for each of the above cases in order to see the progress of the case.

PO, CRPO, Police and doctors should take part in the case reviews. Other officers should participate based on the needs of each case.

Care plan

Is the documentation of the proposed action and goals to be taken to address the children's needs, safety and welfare. The plan identifies the actions required to address the children's needs, the time allocated to achieve these actions and specifies the roles of those participating in the proposed action. Such plans should ensure that there is no confusion for the children, family and significant others about the goals, timelines and responsibilities identified in the case plan.

It is important that child gets back to his/her normal life within a short period. It is important that service providers give a hearing to the child and advice the child accordingly.

Basic needs e.g.: food, clothing, shelter, for the child should be provided.

Understand the strengths and weaknesses of the child when developing the care plan. Care plan should address the identified strengths and weaknesses.

Evidence Based Practice

Children can be provided with services that have proven effectiveness based on research and best practice. There is considerable research that indicates, "what works" in reducing offending behavior. Interventions need to go beyond simply attending to the welfare needs of children. Therefore, if casework is to be effective, interventions must be targeted and designed to meet the offending behavior of children.

"What works" is set out in five principles:

- Risk principle
- Needs principle
- Responsive principle

- Integrity principle
- Professional discretion principle

The **risk principle** states that services should be matched to the risk level of the offenders. Evidence suggests that the majority of resources such as services and programs should be directed to medium and high-risk offenders, identified on the basis of standardized assessment of re-offending risk.

The **needs principle** states that the goal for intervention should be the reduction of dynamic risk factors directly associated with offending risk. In practice, within the Department of Probation these factors are assessed at Divisional /Probation unit level.

The **responsive principle** refers to matching the mode and style of services to the preferred learning style and abilities of offenders. Responsive factors include personality, learning capabilities, and the current level of motivation of the offender. Responsive factors are relevant in considering client suitability for participation in services and programs. The responsive principle also recommends corresponding, where possible, of the children's characteristics with those of the probation/youth officer, magistrate or principle of the certified/remand home undertaking the intervention. For instance, in a case where a child exhibits high levels of anxiety it is best to place the children with staff who demonstrate high levels of interpersonal sensitivity.

The **integrity principle** ensures that the case management process is delivered in the way it has been intended. This requires that staff need to be appropriately trained, resourced, monitored and supervised when undertaking case management with children.

The **professional discretion principle** requires staff to utilize their professional knowledge and judgment (decision making) when undertaking case management. Professional discretion should only be applied for logical and well founded reasons where casework outcomes can be improved by the application of this principle. An example may be that staff re-arranges the priorities identified in a care plan based on their judgment that the children will benefit from such a change.

Care plan for Preventive cases:

Some form of livelihood assistance should be given to the family.

Assistance should be given for the child to continue schooling. Introduce schemes to assist lower income families to continue school education of the children.

Psychosocial support provided for the child and the family.

Look in to the medical needs of the child.

Children in contact with the law:

Findings of the case conference should be communicated to court by the PO.
Case Manger should consider which is more suitable for the child, whether it is family based rehabilitation or institutional rehabilitation.

If family based rehabilitation is recommended:

Some form of livelihood assistance should be given to the family if the reason for the child to come in to contact with the law is poverty.

Psychosocial support should be given for the child and family.

Look in to the medical needs of the child.

If the child had been attending school prior to the incident, catch up education should be provided.

If the child is not in a position to be placed in a school due to illiteracy, non formal education or vocational training should be provided based on the facts of the case.

For institutional based rehabilitation:

Medical assessment conducted on the child

Psychosocial support provided for the child.

If the child had been attending school prior to the incident, catch up education should be provided.

If the child is not in a position to be placed in a school due to illiteracy, non formal education or vocational training should be provided based on the facts of the case.

Encourage family visits and family contacts with the child.

Except for children in Remand homes and children under special orders, child should be sent home during vacation period.

All action taken should be documented in the social care plan.

Monitoring/ follow up

Case manager should consider the following:

1. initiation of the service providing within 02 days after the decision making
2. checking the provision of services at least monthly
3. immediate response to any problem occurred in the implementation of services
4. Ensuring the flow of information among team members and other professionals involved.
5. mediating the relationship between the child and the family and the professionals
6. reassessing the child's situation
7. permanent recording of case information

Case manager should follow up with case or he should delegate his responsibility to a more suitable officer. Case manager should do a monitoring report at least once a month.

CRPOs should do the follow up with cases of reunified children, and children who were prevented from institutionalization. CRPO should visit the family at least once a month and produce a report to the Divisional Secretary.

PO should follow up with children in institutions. He should build a good rapport with the Home Managers. PO should visit the child at least once a month to see the progress of the child.. PO should maintain contact with the family of the child in order to asses whether the family is ready to receive the child. A report on all actions taken should be shred with the POIC and produced to Provincial commissioner.

Case closure:

Case closure is done when the child's assistance and protection programme no longer proves necessary and the family regains its optimum autonomy and operation capacity.

Case manager should prepare a progress report to be submitted to the POIC who in turn produce such report to the Commissioner.

Same report should be produced in court.

Case closure will be done by the POIC