



Changing
THE WAY WE
care



Maestral.

WEBINAR

Guidance on Virtual Monitoring of Children during COVID-19



MacArthur
Foundation

AGENDA

- COVID-19 related guidance
- Virtual Monitoring - overview
- Country examples
- Discussion



COVID-19 GUIDANCE

- [Programming guidance to support decision-making](#)
- [Key messages for children, parents/caregivers, communities and residential care facilities](#)
- Case management considerations for [children at risk of separation](#) and for [children in residential care](#)
- [Gatekeeping considerations](#)
- [Virtual monitoring guidance and tools](#)
- Supported drafting of the [Interagency Protection of Children during the COVID-19 Pandemic: Children and Alternative Care](#)
- BCN's dedicated [COVID-19 resource page](#)

Program Guidance
PREVENTIVE AND RESPONSIVE SUPPORT TO CHILDREN, FAMILIES AND ALTERNATIVE CARE PROVIDERS DURING COVID-19

The COVID-19 pandemic requires that we assess how to best adapt existing or adopt new services and programming to best serve children and families in uncertain times. An ecological framework (see image below) can help us understand how COVID-19 might impact the children, families and communities we aim to serve. This framework also serves to help programs adapt, reorganize and prioritize prevention and response activities.

IMPACT ON CHILDREN AND FAMILIES
Disruptions to families, friendships, daily routines, schooling and the wider community can have negative consequences on children's well-being, development and protection. Measures used to prevent and control the spread of the COVID-19 virus can expose children to protection risks. Home-based, facility-based and zonal-based quarantine and isolation measures, while critical to slow the spread of the virus, can also negatively impact children and their families in different ways. It is important for those working with vulnerable children stay informed about the increased safeguarding risks that can and do occur during an emergency and when families, care givers and communities are under stress. See this [Interagency Technical Guidance](#) on child protection during the COVID-19 pandemic.

COVID-19 can quickly change the context in which children live. Quarantine and social distancing measures such as school closures, community center and other service limitations, prohibitions of family visitation to children in alternative care and general restrictions on movement can disrupt children's routines and stress family social supports. It also places new stressors on parents and caregivers who may have to be without children or out of work. Children and families who are already vulnerable due to socio-economic exclusion, living in overcrowded settings,



Guidelines
VIRTUAL MONITORING OF CHILDREN, THEIR FAMILIES, AND RESIDENTIAL CARE FACILITIES DURING THE COVID-19 PANDEMIC

The COVID-19 pandemic requires adapting and/or developing services and programming to continue to best serve children and families throughout the rapidly changing times. Disruptions to families, friendships, daily routines and the wider community can have negative consequences on children's well-being, learning, development and protection. In addition, measures used to prevent and control the spread of the virus can expose children to protection risks. Home-, facility-, community- and zone-based quarantine and isolation measures, whilst critical to slow the spread of the virus, can negatively impact children and their families. It is important for those working with vulnerable children and families to stay informed about the increased child protection risks that can and do occur during an emergency. See this [Interagency Technical Guidance](#) on child protection during the COVID-19 pandemic. Safeguarding procedures should be reviewed to determine responsibilities, reporting and referral pathways in the case of suspected or substantiated child protection violations. At the same time children, families and communities are resilient and can be helped to draw upon their strengths at these times of stress.

SAMPLE MONITORING PLAN

Twice weekly phone calls to PARENTS/ CAREGIVERS
- Attain update on status of all family members
- Track case plan actions
- Provide timely guidance on prevention, signs and symptoms, prevention, and emergency numbers
- Assess for and make needed referrals
- Provide basic psychosocial support
Twice weekly phone calls with CHILDREN and ADOLESCENTS (able to converse via phone)
- Attain update on health and well-being status
- Track case plan actions
- Provide child-friendly guidance on preventative measures, maintaining learning
- Provide basic psychosocial support
Twice weekly phone calls to RESIDENTIAL CARE FACILITIES
- Attain updates on entry and exit of children
- Provide adult and child-friendly guidance on preventative measures
- Check in about regular supplies, especially WASH, and educational / recreational supplies
- Assess for child protection issues
Weekly communication with local national government partners, child protection and other relevant (health, WASH, education, protection, shelter) humanitarian coordination mechanisms, civil society networks and community leaders
- Attain updated on actions they are taking to protect families and children
- Report / follow up any child protection issues
- Review, update and synchronize key messages
- Identify areas in need of additional support
- Identify possible packages, collaboration opportunities and coordinate efforts
Case file records should be completed for all phone or virtual meetings with families or children

COVID-19 Resources

The COVID-19 pandemic is evolving rapidly and is likely to affect all countries. Because relationships continue and deepen even in emergency, we want to offer our support in navigating the challenges we are all facing. None of us has all the answers we can and will find solutions.

Better Care Network

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Children's Care and Protection and COVID-19

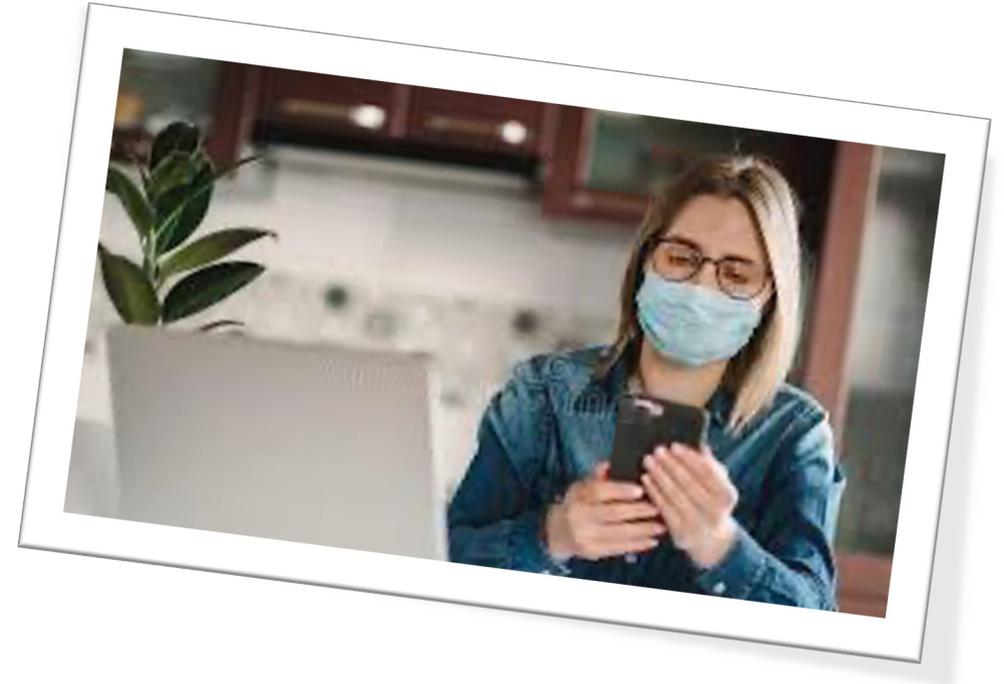
This section includes resources, news, tools, events, and other documents on the response to COVID-19 pandemic as it relates to child protection and children's care.

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VIRTUAL MONITORING OVERVIEW

We define case management as:

*“ the process of **identifying**, **registering**, **assessing** (in reintegration cases this includes tracing activities), **developing a case plan**, **implementing the case plan** (delivering or referring to services, facilitating and overseeing the placement of the child into the family environment), and **ongoing monitoring and documentation working** towards case closure. ”*



VIRTUAL MONITORING OVERVIEW

WHY: To support case workers (or anyone else conducting virtual monitoring of children and families) to conduct virtual monitoring of children and families within their caseload throughout the COVID-19 pandemic.

WHAT: Includes phone scripts to help guide conversations with caregiver/parent/child. Depending on the response and the current situation of the caregiver/parent/child, there are suggested messages and/or actions to be delivered by the case worker. This guidance also includes a case plan template to help the case worker plan for interventions including scheduling of next calls.

WHO: Persons responsible for conducting casework with children and families. Targets vulnerable families at risk of separation, violence or other child protection concern and families who have been reunified, including those where placements have occurred as a result of COVID-19.



STOP LIGHT SYSTEM: Categorize risk and determine frequency of engagement

HIGH RISK - IMMEDIATE ACTION REQUIRED

Child is currently experiencing one or more of the following:

- a) violence, abuse, neglect or exploitation;
- b) malnutrition / chronic illness / disability & no proper health care;
- c) economic resources creating barriers to food and water.

MEDIUM RISK

Referral needed or follow up call required within the next week. Child is at risk of or there is concern about violence, abuse, neglect or exploitation, malnutrition or other physical or mental health concern.

LOW RISK

Child is not currently being harmed, and is having their needs met.

Suggested frequency of engagement

High risk cases should be monitored twice per week

Medium risk cases should be monitored once per week

Low risk cases should be monitored every two weeks

REVIEW OF THE TOOL: Benchmarks

Protection and safety

1. Safe Children adolescents and caregivers are not currently experiencing violence, exploitation, or exposure to violence at home, in the community and online. Household is free from substance abuse. Household members who have experienced violence have received appropriate support services (health, protection, psychosocial, and/or legal).

Health and development

2. Nourished Household able to meet the nutritional needs of the all members of the household and incorporate healthy habits into their daily routine.
3. Accessing health services Children, adolescents and caregivers have access to health information (especially COVID-19 prevention information) have access and, are implementing prevention measures and are accessing health services as required.

Psychosocial wellbeing

4. Resilience Household members demonstrate use of positive coping strategies, incorporate healthy psychosocial habits into their daily routine and express hope for the future.
5. Accessing social support services Children, adolescents and caregivers have access to support services.

Economic stability

6. Stable Caregivers are currently able to meet the cost of children's basic needs such as food, clean drinking water, hygiene (soap, washing powder), medications, school supplies and rent.

Education

7. Accessing education Efforts are being made to provide children with age-appropriate educational activities and materials, including online or radio-disseminated classes where provided and possible

Relationship and attachment

8. Positive communication Communication between household members is frequent and open with both children and caregivers feeling understood and loved.
9. Consistency There is consistency in the relationship between child and caregiver in terms of level of supervision, responsiveness, boundaries, and discipline.

Example phone scripts

Step 5: Health and develop- ment	<p>It's important during this time that we make efforts to maintain our health. How is your family's health and hygiene at the moment? Further prompts could include:</p> <p>Are all household members able to eat enough food?</p> <p>Can you share with me what you know about the government physical isolation and hand washing guidance? Are you able to follow the guidance in your household?</p> <p>Have you explained the guidance to children and are they able to understand? Are all household members sleeping well and doing some daily exercise? Is anyone in your household showing flu-like symptoms?</p>	<p><i>If you hear that there:</i></p> <p>- <u>is or has been</u> <i>malnutrition, chronic illness or disability and no access to proper health care select RED in next cell and follow the next step prompts.</i></p> <p>- are <u>risks</u> of <i>malnutrition, chronic illness or disability and no proper access to health care select ORANGE in next cell and follow the next step prompts.</i></p> <p>- are <u>no signs</u> of <i>malnutrition, chronic illness or disability and no proper access to health care GREEN in next cell and follow the next step prompts.</i></p>	<p>Select risk level for nourished benchmark</p>	<p>Red</p>	<p>Reassure the caregiver that you are here to help and that you would like to refer them for some support to help. Do not make any promises you cannot keep.</p> <p>If a household member has become ill, ensure caregiver understands importance of physical isolation and how to continue to provide care to ill person</p>	<p>Depending on need, provide or refer for:</p> <ul style="list-style-type: none"> - food support, including therapeutic food for malnourished children - health services and testing, medical supplies
			<p>Select risk level for accessing health services benchmark</p>	<p>Green</p>	<p>Provide basic COVID-19 prevention messaging.</p>	<p>Continue to monitor implementation of preventative measures within household. Encourage the family to stay up to date with information about COVID-19 www.health.go.ke or 719.</p>

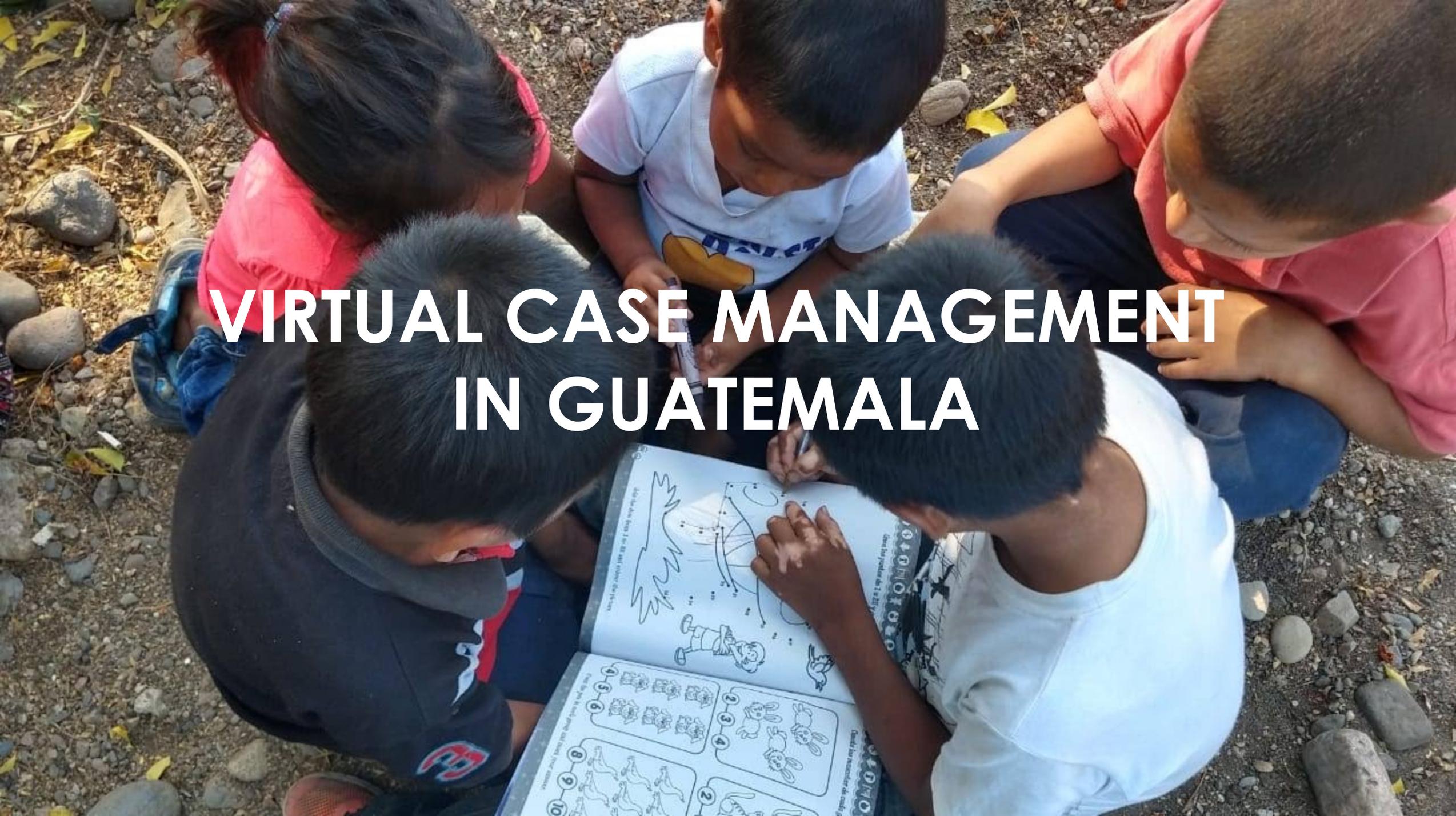
EXAMPLE ACTIONS

Domain	Risk rating	During call	After call
Protection & Safety 1. Safe Children, adolescents and caregivers are not currently experiencing violence, exploitation, or exposure to violence at home and online. Household is free from substance abuse. Household members who have experienced violence have received appropriate support services (health, protection, psychosocial, and/or legal).	RED	Reassure the careleaver/caregiver that you are here to help and that you would like to refer them for some support to help. Ask if they feel that their immediate wellbeing and safety is at risk. Do not make any promises you cannot keep.	Immediately call Child Helpline / local child protection volunteers / Statutory Children's Officer / police to report incident of violence. Where a child is in imminent danger, ensure that referral is made to the police. Refer child to Child Helpline for free counselling. Provide child and/or caregiver with number to call: #116 in Kenya/ WhatsApp: 0722 116 116 (7am – 6pm)/ Chat: https://childlinekenya.co.ke/ 7am – 6pm)/ Email: 116@childlinekenya.co.ke (8am – 5pm). For victims of SGBV, case workers who are not trained in SGBV should refer cases. Case workers should be aware that services situated within official clinical settings like hospitals are more likely to be able to provide static, face to face services for the duration of the pandemic.
	ORANGE	Encourage the caregiver to take steps to address the risks they are facing. As appropriate, you could: -Encourage limited or no alcohol consumption (link to messaging related to importance of overall health in COVID-19 recovery time, should infection occur) -Encourage caregivers to monitor children's online activity -If a household member is being physically isolated within the household with concerns of COVID-19, support caregiver to explain this to all household members	Follow up call within 3-5 days to check and see if there have been any incidents. Share, via phone or WhatsApp, WHO parenting tips. See here for English. Leave information for Child Helpline and let child and/or adult know that they can reach out if they ever feel they are at risk of violence, abuse, neglect or exploitation. #116 in Kenya/ WhatsApp: 0722 116 116 (7am – 6pm)/ Chat: https://childlinekenya.co.ke/ 7am – 6pm)/ Email: 116@childlinekenya.co.ke (8am – 5pm)
	GREEN	Encourage householder members to walk away when things get stressful and acknowledge that this is a difficult time and we will be tested. Suggest practicing mindfulness (e.g. go for a walk, count backward from 20 - 1 whilst deep breathing) when faced with conflict.	Follow up call within two weeks to check and see if there have been any incidents. Share, via phone or WhatsApp, WHO parenting tips. See here for English.

EXAMPLE CASE TRACKER

Case file number	Client name	Case worker's name	Date of call	Household member/s spoken with including caregiver(s), child(ren)	1. Safe	2. Nourished	3. Accessing health services	4. Resilience	5. Accessing social support services	6. Stable	7. Accessing education	8. Positive communication	9. Consistency	Overall risk level (AUTOMATIC)	Issues/ activities discussed with family and immediate actions	Issues to discuss in the next call or actions to complete	Suggested date of next case (AUTOMATIC based on risk level)
111111	John Doe	Sam Smith	3-May-20	Jane Doe, Jill Doe, Joe Doe	Orange	Green	Green	Green	Not discussed	Not discussed	Not discussed	Not discussed	Not discussed	Orange	Encouraged limited or no alcohol consumption	Follow up on alcohol consumption and related issues	10-May-20
111222	Mary Lee	Sam Smith	24-May-20	Terry Lee, Larry Lee	Green	Green	Green	Orange	Green	Green	Green	Green	Green	Orange	Encouraged caregivers to have a "parenting buddy" outside of their household, who they can call for parenting advice and support (perhaps a relative or village elder).	follow up on action, provide additional parenting resources	31-May-20

VIRTUAL CASE MANAGEMENT IN GUATEMALA



CONTEXT & ACTIVITIES



20 families in the case management process with 52 children.



Most of these families have been monitored at home for a year.



COVID-19 / Development of case management guidance in emergency situations



Pilot Test: application of the virtual tool with 12 families in the process of reintegration



CASE MANAGEMENT IN EMERGENCIES

Guía para la implementación de la metodología de manejo de caso en situaciones de emergencia como el COVID-19

La metodología de manejo de caso es un marco de trabajo que conlleva la organización, planificación e implementación de las diferentes etapas de los procesos de prevención, reintegración y adopción de los niños, niñas y adolescentes (NNA) que se encuentran privados del cuidado parental o en riesgo de separación. Comienza cuando se identifica un NNA que posee algún tipo de vulnerabilidad o se encuentra en una situación que requiere apoyo o asistencia. La gestión de casos implica que un profesional (trabajo social y psicología) o equipo de profesionales evalúen las necesidades del caso y organicen, coordinen supervisen y definan un paquete de servicios para satisfacer las necesidades del caso específico. Involucra la participación de todas las instituciones del sistema de protección a la niñez y la adolescencia en cada etapa del proceso de protección.

Dentro del proceso de manejo de caso se implementan nueve etapas (identificación, evaluación del NNA, investigación, plan de cuidado, preparación de NNA y familia, reunificación, seguimiento del caso, reintegración y cierre) que se consideran esenciales para determinar la reintegración saludable y sostenible de un NNA a un entorno familiar. **Sin embargo, en situaciones de emergencia como la que se vive actualmente por el COVID-19¹, no es posible implementar las nueve etapas correspondientes, debido a que el tiempo es limitado, se debe responder inmediatamente a la emergencia y necesidades que surjan de ella, para los NNA y familias, restricciones de horario y movilización para profesionales que trabajan directamente con los NNA y principalmente condiciones de riesgo para todas las personas debido a la presencia del virus.**



Orient the work teams about the prioritized processes in case management during an emergency situation.

Checklist to focus on the most important aspects during an emergency (e.g. health, developmental and psychosocial well-being).

Virtual courses designed to strengthen the skills and competencies about case management process for staff (140 employees) of the Social Welfare Secretariat.

MAIN FINDINGS (Virtual Tool)

Establishing
empathy

Greeting time is
important

The time can be
longer than 20
minutes

Questions be
adapted (i.e., do
not have to be
literal)

The tool helps to
deepen the
monitoring of the
family

It is an excellent
option for remote
monitoring

NEXT STEPS

- Apply the tool with all families currently in the process of reintegration and case management
- Design and implement a webinar to train other staff from government institutions (Social Welfare Secretariat) in how to use the virtual tool



KENYA'S VIRTUAL MONITORING EXPERIENCE

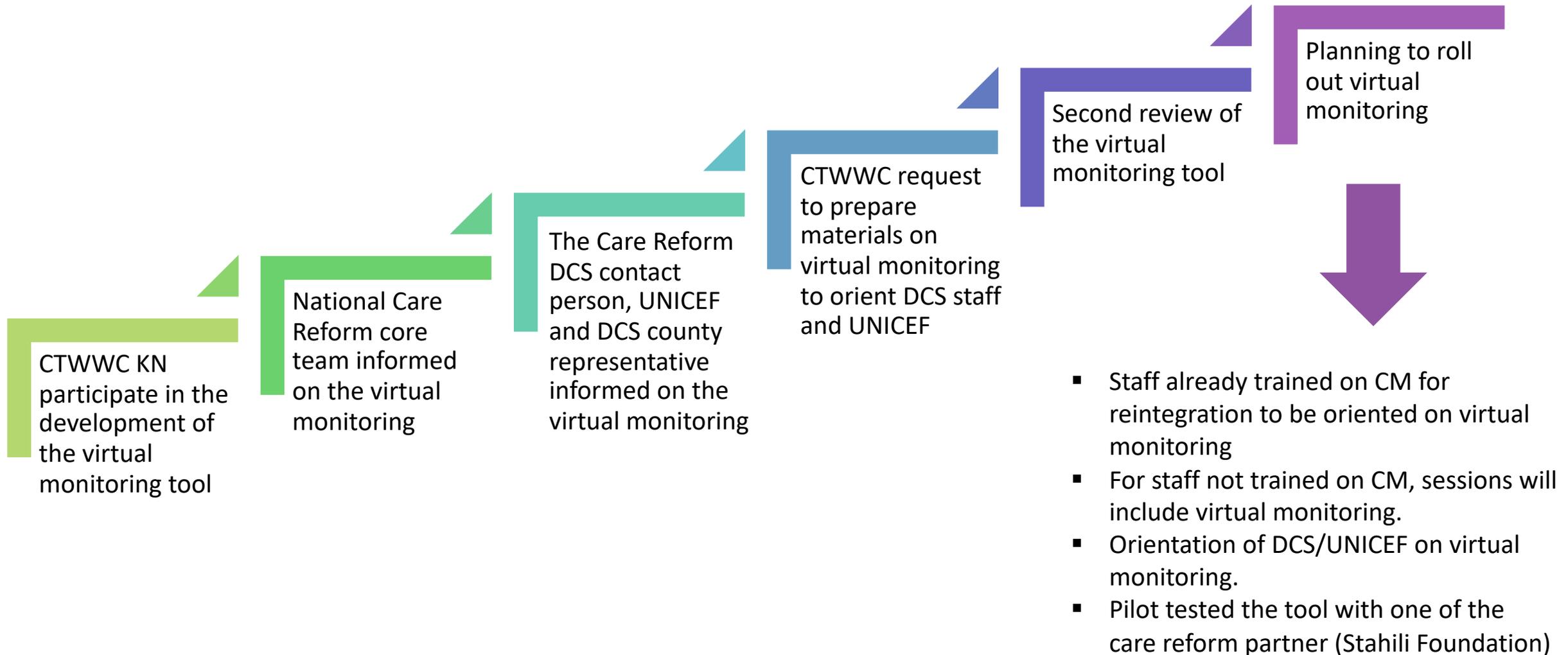


RATIONALE FOR VIRTUAL MONITORING

- To contribute to the containment of the COVID-19.
- Standardize virtual monitoring: *90% of children released due to COVID-19 pandemic already being followed up by CCI staff.*
- Enhance sustainable reintegration: *14% of children released were prepared, 75% of the children released were not prepared.*
- Government request to develop and train their workers.



IMPLEMENTATION OUTLINE



PILOT EXPERIENCE

“I like the color code and the next action section... it helps with the follow up...”

Stahili Foundation Staff

STRENGTHS

- Able to track various families at ago
- Easy to use tool
- The colour codes very helpful with the follow up
- Provision for next action to be taken helps with the follow up
- All round scripts and clear. Capture all the key domains, however, may not be covered in one call.
- Tool is family-oriented

IMPROVEMENTS

- There is need to indicate the date format to be followed to allow automation of next visit date and color code.
- Consider extending calls to children once consent has been sort, especially for cases where children come from the same family.
- Include a clause that the tool can be used to monitor an individual who is not in a family set up.
- Consider expanding messages to children and families

FUTURE PLANS

- Ensure that the virtual monitoring is linked to case planning to enhance sustainable reintegration.
- Consider expanding the action points to clear manageable steps and be integrated into the case plans.
- To integrate virtual monitoring as part of the monitoring approaches within the CM for reintegration steps.
- Documenting lessons learned, experiences, challenges for improvement.

“Should we consider integrating virtual monitoring into the CM process? That’s a quick yes. We should certainly integrate the tool into our case management procedures.”

--Stahili Foundation Staff

The background of the image shows two hands held up, palms facing forward, in a gesture of questioning or discussion. The hands are slightly out of focus, and the background is a blurred mix of colors, including green, brown, and red. A semi-transparent white rectangular box is centered over the hands, containing the text.

**QUESTION,
COMMENTS &
DISCUSSION**