

The National Authority for Child Protection and Adoption

Order no. 177/2003

of December 16, 2003

Published in the Official Gazette, Part I no. 52 of January 22, 2004

For the approval of the mandatory minimum standards for the children's hotline, the mandatory minimum standards for the counseling center for the abused, neglected and exploited child, as well as of the mandatory minimum standards for the community resource center for the prevention of child abuse, neglect and exploitation

Based on the provisions of the Emergency Ordinance of the Government no.12/2001 on the establishment of the National Authority for Child Protection and Adoption, approved and amended by Law no. 252/2001, and of article 9 paragraph 3 of the Government Decision no. 770/2003 on the organization and operation of the National Authority for Child Protection and Adoption,

the Secretary of state of the National Authority for Child Protection and Adoption issues the present order.

Article 1 The mandatory minimum standards for the children's hotline, the mandatory minimum standards for the counseling center for the abused, neglected and exploited child, as well as of the mandatory minimum standards for the community resource center for the prevention of child abuse, neglect and exploitation, listed in the appendices no. 1, 2 and 3 that are an integral part of the present order are hereby approved.

Article 2 The present order shall be published in the Official Gazette of Romania, Part I.

The secretary of state of the National Authority
for Child Protection and Adoption,
Gabriela Coman

Bucharest, December 16, 2003

No. 177

APPENDIX 1

MANDATORY MINIMUM STANDARDS FOR THE CHILDREN'S HOTLINE

The children's hotline, further referred to as CH, is a permanent type child protection service; its mission is to receive notifications of child abuse, neglect and exploitation situations, to provide telephonic counseling in these situations and to promptly intervene in emergency cases by means of a mobile team.

The present standards are complemented by the following documents:

1. Compulsory minimum standards for the community resource center for the prevention of child abuse, neglect and exploitation
2. Compulsory minimum standards for the children's hotline
3. Methodological guide for multidisciplinary team and network intervention and prevention in child abuse, neglect and exploitation situations.

The standards are grouped on the following areas of interest:

Advocacy and relationships with the community

1. Advocacy

Telephonic counseling

2. Assessing the immediate risk
3. Telephonic assistance and counseling

Intervention in emergency situations

4. The mobile team

Administration and management

5. Service permanency
6. Location, financial resources and facilities

Human resources

7. Recruitment and employment
8. Number of staff members, background and ongoing training
9. Supervision

ADVOCACY AND RELATIONSHIPS WITH THE COMMUNITY

Standard #1 **Advocacy**
The children's hotline develops advocacy activities for the services provided in the best interest of the children exposed to abuse, neglect and exploitation.

Result **The community is informed and involved in the process of notifying and solving child abuse, neglect and exploitation situations.**

Implementation procedures for Standard #1

1.1 The CH develops advocacy materials for children, professionals and other members of the community containing relevant information about its role in the community, how to access it and operation procedures.

1.2 The CH supports the annual organization of community advocacy, education and communication campaigns on the issue of child abuse, neglect and exploitation, further referred to as A/N/E.

1.3 The CH edits statistical reports and publishes relevant data in the media on a periodical basis. The content of the statistical report and of the other materials released to the public is previously approved by the service coordinator.

1.4 The CH maintains a database with useful information on the community services for child and family in at least the following domains: social, including child protection and protection of individuals with disabilities, medical, educational, law enforcement, justice.

Indicators for Standard #1

(I)1.1.1 The CH possesses advocacy materials (for example flyers, brochures).

(I)1.1.2 The content of these materials is adequate to the target group (e.g. children, parents, professionals, media).

(I)1.2 The annual number of advocacy, education and communication campaigns the CH has been involved in.

(I)1.3.1 The annual number of statistical reports made public.

(I)1.3.2 The annual number of published articles containing relevant data from the CH's activity.

(I)1.3.3 The content of the statistical reports and the published materials that need to carry the signature of the service coordinator.

(I)1.4 The information database on the community services for child and family is operational.

TELEPHONIC COUNSELING

Standard #2 **Assessing the immediate risk**
The children’s hotline counselors assess the immediate needs of the client and the risk potential for exposing the child to abuse, neglect and exploitation.

Result **The clients are provided with information and services adequate to their needs, as well as recommendations for solving the situations that have determined them to dial the children’s hotline.**

Implementation procedures for Standards #2

2.1 The CH counselors use assessment instruments estimating the immediate needs of the caller, the risk and gravity of the A/N/E situation.

2.2 The CH counselors fill out the call form during the phone call.

2.3 In the case of community notifications regarding an A/N/E suspicion or situation, the CH counselors must fill out the mandatory notification and initial assessment form for A/N/E situations in maximum 12 hours after recording the call. The forms are conveyed to the specialized public service for child protection, further referred to as SPSCP, in maximum 24 hours after filling them out in order to create the primary situation of these cases and coordinate the intervention. To this purpose, the SPSCP manager has the obligation to appoint case managers that will assemble the multidisciplinary team and coordinate the inter-agency intervention in the A/N/E situations notified, recorded and taken over by the SPSCP.

Indicators for Standard #2

(I)2.1 The CH counselors use the assessment instruments listed in the mandatory minimum standards: the call form and the mandatory notification and initial assessment form for A/N/E situations. The mandatory notification and initial assessment form for A/N/E situations is an appendix to the methodological guide for multidisciplinary team and network intervention and prevention in A/N/E situations.

(I)2.2.1 The average monthly number and the annual number of call forms filled out by the CH counselors.

(I)2.2.2 The content of the call form.

(I)2.3 The average monthly number and the annual number of mandatory notification and initial assessment form for A/N/E situations filled out by the CH counselors and conveyed to the SPSCP.

Standard #3

Telephonic assistance and counseling

The children’s hotline counselors provide clients with assistance and counseling in order to overcome crisis situations and to properly solve the cases presented or notified by them.

Result

The clients receive the emotional and informational support needed in conditions of confidentiality regarding their identity and the presented or notified situation.

Implementation procedures for Standard #3

3.1 The CH counselors provide information tailored to the needs of the clients and guide them to the appropriate services, including reorientation and referral to other specialty services in the field of child protection against abuse, neglect and exploitation when solving the presented problem would exceed the competencies of the CH.

3.2 The CH counselors use specific counseling techniques, which are documented.

3.3 The CH counselors run client assistance and counseling activities in order to overcome a crisis situation.

3.4 The CH counselors respect the anonymity and confidentiality of phone calls. In respect to the latter, in emergency situations, the counselors provide all the necessary information, including those relating to the child’s identity and location, with the exception of the information relating to the notifying person if not the child himself/herself, to the mobile team for intervention under the provisions of the present mandatory minimum standards.

3.5 The CH counselor respects the wish of the caller to end the phone call. In the case of a call exceeding 50 minutes, which is the maximum allowed duration, the counselor will summarize and end the call himself/herself, but, as appropriate, the call can be resumed if the client requests the support of the counselor again. Relevant information on these calls is recorded in the call register.

Indicators for Standard #3

(I)3.2 The counseling techniques employed are proved by written methodologies: non-directive telephonic counseling and crisis counseling.

(I)3.3 The average monthly number and the annual number of calls that have necessitated assistance and counseling to overcome crisis situations.

(I)3.4.1 The call form includes a field in which the client's anonymity is recorded, at the client's request.

(I)3.4.2 The number of complaints recorded by the service provider, or the employer respectively (SPSCP, authorized private body, further referred to as APB, or authorities of the local government), in respect to the breach of confidentiality for phone calls.

(I)3.5.1 The average length of phone calls.

(I)3.5.2 The average monthly number and the annual number of calls exceeding 50 minutes and the reason for the extension of phone calls.

INTERVENTION IN CRISIS SITUATIONS

Standard #4

The mobile team

The children's hotline has a mobile team which is traveling in the field for assessment and intervention in emergency situations.

Result

The child whose life is endangered by abuse, neglect and exploitation is urgently placed in a securing environment.

Implementation procedures for Standard #4

4.1 The mobile team consists of at least: one of the counselors from the CH on duty with University degree in social-human studies and a police officer.

4.2 The service provider closes cooperation agreements with the Police Inspectorate and police precincts, clearly detailing the responsibilities of the staff members providing intervention in emergency situations, in compliance with the provisions of the legislation in force.

4.3 The mobile team operates in compliance with a methodology developed based on the methodological guide for multidisciplinary team and network intervention and prevention in A/N/E situations. The methodology is recorded in writing and made known to the members of the mobile team.

4.4 The mobile team responds as soon as the CH counselor receiving the call determines that this is an emergency situation defined by a threat to the child's life because of severe abuse, neglect and exploitation.

4.5 When the response time of the mobile team exceeds one hour and the information about the case indicates imminent danger to the child's life, the CH counselor contacts the social worker from the public social work service from the Local Councils of municipalities, towns and sectors of the Bucharest municipality or the community social worker or other resource-person from the community, i.e. police and specialty services for child protection against A/N/E (for example CRC, CC) to assess the case as soon as possible. The CH counselor maintains contact with the professionals mentioned earlier in order to take a decision according to the specific situation initially assessed by them.

4.6 The decision for emergency placement complies with the legislation in force and takes into account the recommendations of the methodological guide for multidisciplinary team and network intervention and prevention in A/N/E situations.

4.7 If necessary, the mobile team will notify, as appropriate, the ambulance service and the district attorney's office.

4.8 The mobile team counselor provides child assistance and counseling for the duration of the emergency intervention; in case several children are involved, the approach is initially individual and subsequently collective.

4.9 The observations and remarks of the mobile team are recorded in the mandatory notification and initial assessment form for A/N/E situations. This document is filled out at the CH headquarters, not in the field, in the shortest time possible following the field intervention. The forms are conveyed to the SPSCP in maximum 12 hours after the field intervention in order to create the primary situation of A/N/E cases and coordinate the intervention.

Indicators for Standard #4

(I)4.1 The structure of the mobile team under the provisions of the present mandatory minimum standards.

(I)4.2 The cooperation agreements with the police are available and in effect.

(I)4.3 The intervention methodology is available and known by the members of the mobile team.

(I)4.4 The average monthly number and the annual number of emergency situations in which the mobile team has responded.

(I)4.5 The average monthly number and the annual number of situations in which the intervention of the resource-persons was necessary.

(I)4.6.1 The average monthly number and the annual number of emergency placements following interventions in emergency situations, detailed on type of placement, respectively:

- Professional maternal assistants (Foster parents) trained and licensed for such situations;
- Centers or shelters for mothers and children victims of domestic abuse and violence, under the provisions of Law 217/2003 for the prevention of domestic violence;
- Emergency intake centers.

(I)4.6.2 Analysis of the circumstances of the emergency placements.

(I)4.7.1 The average monthly number and the annual number of situations that have required the notification of the ambulance service and medical intervention.

(I)4.7.2 The average monthly number and the annual number of situations that have required notification and intervention by the district attorney's office.

(I)4.9.1 The average monthly number and the annual number of mandatory notification and initial assessment forms for A/N/E situations filled out by the mobile team and conveyed to the SPSCP.

ADMINISTRATION AND MANAGEMENT

Standard #5 **Service permanency**
The children's hotline is permanently available, 24 hours per day, 7 days per week, including during legal holidays; the service is toll-free.

Result **The members of the community have permanent access to the children's hotline, without discrimination, based on the needs they have at a certain time.**

Implementation procedures for Standard #5

5.1 The coordinator has the responsibility to put the CH's mission in writing, to display, promote and make it known both within the service and in the community.

5.2 The CH has an internal rulebook or internal operation norms, depending on the employer, clearly detailing the working hours and confidentiality, approved by the service coordinator and made known to the entire staff.

5.3 All the CH counselors, as well as the members of the mobile team sign confidentiality agreements in respect to the information pertaining to the clients of the service.

5.4 The CH activity stops only under special circumstances that involve failures of the telephony network. In this situation, the service provider has the obligation to find another temporary solution for the quick reception of notifications from the community regarding urgent A/N/E cases.

5.5 The service's permanency is provided by counselors and volunteers. Their activity is scheduled on 4-8 hour intervals; during nighttime it is provided by minimum two employees, one of them required to be a counselor with a University degree in social-human studies.

5.6 The shift may be extended when the shift change coincides with a phone or field intervention.

5.7 The service provider ensures that there is no taxation for the clients that access the children's hotline.

5.8 It is recommended that the phone number contained as few digits as possible and be unique per county or sector of the Bucharest Municipality, irrespective of the number of service providers who set up children's hotlines in the respective county or sector.

Indicators for Standard #5

(I)5.1 The CH mission is displayed in an adequate location, it is known by the service staff and advocated through specific means in the community (for example flyers, brochures).

(I)5.2 The internal rulebook, or the internal operation norms respectively are available, contain clear provisions regarding the respect of confidentiality and are known by the service staff.

(I)5.3 Confidentiality contracts.

(I)5.4 The number of interruptions occurred per year, the reason and replacement solution.

(I)5.5 The work schedule is respected and complies with the provisions of the compulsory minimum standards.

(I)5.6 The number of free days and payment of extra hours for exceeding the work time.

(I)5.8 The contract with the public telephony service.

Standard #6 **Location, financial resources and facilities**
The children's hotline has an adequate location, sufficient financial resources and adequate facilities that ensure its operation at optimum efficiency, an efficient intervention and permanency in the community.

Result **The children and families in the community have access to a quality service that they can access in order to satisfy their needs at a certain time and to notify abuse, neglect and exploitation situations.**

Implementation procedures for Standard #6

6.1 The CH operates in a specially designed location, where the clients' access is restricted. The CH's location will not be known by the general public. This measure involves contact with the client only by means of the telephone; in the case of a field intervention, the mobile team will interact with the clients.

6.2 The funds allocated to the CH by the service provider (SPSCP, APB or authorities of local government) are sufficient for the fulfillment of the CH's mission and for complying with the provisions of the compulsory minimum standards, including toll-free access of clients when calling the hotline and for forensic investigation of children in emergency situations. In emergency situations when the child is a victim of domestic violence, the funds required for the forensic investigation of the child involved will be procured in compliance with the provisions of article 9, paragraph (2) of Law 217/2003 for the prevention of domestic violence since the establishment of the National Agency for Family Protection. Until that time, these expenses will be supported from the CH budget.

6.3 The CH has the following minimum facilities, adjusted to the number of counselor per shift:

- a) one phone unit with PBX (switchboard) functionality
- b) headset
- c) adaptor for the phone unit
- d) PC for quick access to the database and editing call forms
- e) desk
- f) ergonomic chair
- g) sofa
- h) file cabinet for archiving paper documents

6.4 The CH's facilities must also ensure intervention in emergency situations; this requires, among others, the CH to possess a vehicle for traveling in the field and at least one mobile phone for the aforementioned vehicle, as well as the required space and equipment to edit and archive the documentation.

6.5 The CH maintains a database for recording, monitoring and assessing its own activities, used in compliance with the legislation in force in respect to the access to information, ensuring the confidentiality of client information.

6.6 Call recording and monitoring will be reflected in the service's documents, which as a minimum include the following:

- a) call form (appendix 1A)
- b) mute/wrong number call form (appendix 1B)
- c) codes for the call form (appendix 1C)
- d) message log
- e) the mandatory notification and initial assessment form for A/N/E situations

6.7 The message log allows the CH counselor to be informed, before entering the shift, about certain special calls, either because of the crisis situation, or because of repeated calling, leading to a unified and coherent approach.

6.8 The service coordinator has the responsibility to ensure that call monitoring and analysis is carried out on a monthly and annual basis in the form of reports approved by him/her.

Indicators for Standard #6

(I)6.1 The CH location complies with the provisions of the mandatory minimum standards.

(I)6.2 The service provider supplies the necessary funds to run the activities listed in the mandatory minimum standards.

(I)6.3 – (I)6.4 The CH facilities meet the requirements of the mandatory minimum standards.

(I)6.5.1 The CH database for recording, monitoring and assessing its own activities is operational.

(I)6.5.2 The aforementioned database is utilized in compliance with the legislation in effect in this field.

(I)6.6.1 The CH documents comply with the provisions of the mandatory minimum standards.

(I)6.6.2 The content of the service's documents.

(I)6.8.1 Monthly and annual reports on the type of calls are approved by the service coordinator.

(I)6.8.2 The content of the monthly and annual contain, as a minimum, the following:

- The average monthly number and the annual number of calls.
- The average monthly number and the annual number of emergency calls (for overcoming crisis situations and/or A/N/E cases requiring emergency intervention from the mobile team).
- The average monthly number and the annual number of calls in A/N/E situations.
- The average monthly number and the annual number of notifications for A/N/E situations.

HUMAN RESOURCES

Standard #7 **Recruitment and employment**
The staff of the service is carefully and responsibly selected through a recruitment and employment process taking place in compliance with the legislation in force and meeting the needs of the center.

Result **The clients are provided with quality services by qualified staff.**

Implementation procedures for Standard #7

7.1 The employer has the obligation to employ qualified staff that will meet the requirements of the compulsory minimum standards. If the children's hotline operates in a geographical area with communities of ethnic minorities, it is recommended that the CH team of counselors also included professionals speaking the language of those minorities.

7.2 The recruitment and employment process is recorded and the service coordinator has decision-making abilities for the staff selection process.

7.3 The employer may have a certain type of staff serving the CH mission without them being part of the own staff of the center, but he/she has the obligation to ensure the employment of the specialty staff and of the volunteers.

7.4 The specialty staff is represented by counselors who must have a University degree in social-human studies.

7.5 The center's coordinator must have a University degree in social-human studies and at least two years experience in child and family services.

Indicators for Standard #7

(I)7.1 Diplomas and other documents attesting the qualifications of the staff employed.

(I)7.2 The recruitment and employment process complies with the legislation in force and the provisions of the compulsory minimum standards.

(I)7.3 – (I)7.7 The organizational chart, the diplomas, the labor contracts, the volunteering contracts, the job descriptions. It will be verified to what extent the job descriptions are known by the employees and if they are revised in compliance with the legislation in force.

Standard #8 **Number of staff, background and ongoing training**
The human resources of the children’s hotline are sufficient in number, have the appropriate background and abilities to work in a multidisciplinary team and in an inter-agency network.

Result **The children and families in the community are provided with quality and personalized services by well-trained professionals, with empathic and communication abilities.**

Implementation procedures for Standard #8

8.1 The number of staff must be adequate for the fulfillment of the activities listed in the mandatory minimum standards. The employer together with the center’s coordinator set the minimum number, which is recorded and revised at least once every year. When setting the minimum number, the provisions of the present mandatory minimum standards regarding the organization of shifts will be considered, so that during every shift there is at least one counselor with a University degree in social-human studies who will join the mobile team.

8.2 When employed, if lacking initial training in the sector of child protection against abuse, neglect and exploitation, each professional, including the center’s coordinator, are provided with training in this field, supported from employer’s budget.

8.3 When employed, the counselors and volunteers will attend a 40 hour training course to get acquainted with the specific work techniques for this type of service, supported from the employer’s budget.

8.4 Each employee of the center, including its coordinator, are provided with at least 42 hours of ongoing training per year in the field of child protection against abuse, neglect and exploitation or in related fields, supported from the employer’s budget.

8.5 The permanent education of the specialty staff, as well as the ongoing training of the entire staff of the CH will be promoted, supported and recorded by the service coordinator.

8.6 The volunteers of the service act based on clear contracts, in compliance with the legislation in force.

8. When employed, if lacking training in the management of social services, the service coordinator is provided with training in this field, supported from the employer's budget.

8.8 The coordinator is provided with at least 21 hours of training in service management per year, supported from the employer's budget.

8.9 The permanent education and ongoing training of the employees are conducted in compliance with the legislation in force, through courses organized in the educational, medical and adult professional training system.

8.10 The counselors appointed to be part of the mobile team must have at least one year of practical experience in specialty services for child protection in emergency situations or against abuse, neglect and exploitation.

Indicators for Standard #8

(I)8.1.1 The number of staff is adequate for the activities listed in the compulsory minimum standards and recorded.

(I)8.1.2 The ratio between the annual number of calls and the number of counselors and volunteers.

(I)8.2 – (I)8.9 The personal file of each employee, including that of the service coordinator and of the volunteers, includes the documents required by the legislation in force, including the graduation certificates for the initial and ongoing training listed in the mandatory minimum standards.

(I)8.10 The graduation certificates with national recognition and those with recognition from the employer. For the latter, the manner in which the training program was organized will be checked using the criteria listed in the legislation regulating the professional training of the adult.

(I)8.11 Employment documents and curriculum vitae.

Standard #9

Supervision

The children's hotline possesses an efficient system for the supervision of the human resources that allows its operation at optimum efficiency and ensures its permanency in the community.

Result

The staff are motivated and efficient, providing quality services to the clients.

Implementation procedures for Standard #9

9.1 Supervision meetings with the staff take place periodically – at least once a week or whenever necessary – and are recorded.

9.2 The supervision meetings take place individually or in a team.

9.3 The service coordinator has the obligation to provide the internal and external supervision of the specialty staff and the volunteers.

9.4 The supervision of the volunteers is provided by an experienced counselor appointed by the service coordinator.

9.5 The employer has the obligation to provide supervision for the service coordinator.

9.6 The supervision is provided by professionals with a University degree in social-human studies with training in supervision and at least 2 years experience in child and family services. The supervision of the counselors is done by professionals with a University degree in social-human studies with at least 2 extra years of experience in counseling than the supervised.

Indicators for Standard #9

(I)9.1 The average monthly number and the annual number of staff supervision meetings.

(I)9.2 – (I)9.5 The average monthly number and the annual number of individual and group supervisions for the counselors, volunteers and service coordinator.

(I)9.6 Recorded documents pertaining to supervision.

Appendix 1B

MUTE/WRONG NUMBER CALL FORM	MUTE/WRONG NUMBER CALL FORM
Form number	Form number
G <input type="text"/> M <input type="text"/>	G <input type="text"/> M <input type="text"/>
Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Time <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Time <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Shift I <input type="text"/> II <input type="text"/> III <input type="text"/>	Shift I <input type="text"/> II <input type="text"/> III <input type="text"/>
Counselor ID <input type="text"/>	Counselor ID <input type="text"/>
Relevant information	Relevant information
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MUTE/WRONG NUMBER CALL FORM	MUTE/WRONG NUMBER CALL FORM
Form number	Form number
G <input type="text"/> M <input type="text"/>	G <input type="text"/> M <input type="text"/>
Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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Shift I <input type="text"/> II <input type="text"/> III <input type="text"/>	Shift I <input type="text"/> II <input type="text"/> III <input type="text"/>
Counselor ID <input type="text"/>	Counselor ID <input type="text"/>
Relevant information	Relevant information
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MUTE/WRONG NUMBER CALL FORM	MUTE/WRONG NUMBER CALL FORM
Form number	Form number
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Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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Shift I <input type="text"/> II <input type="text"/> III <input type="text"/>	Shift I <input type="text"/> II <input type="text"/> III <input type="text"/>
Counselor ID <input type="text"/>	Counselor ID <input type="text"/>
Relevant information	Relevant information
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Appendix 1C

NATURE OF PROBLEM				RESULT OF CALL
Sexuality	ABZ	Child abuse	TR1	Emergency transfer (police, paramedics, fire department)
AC sexual activity (including self-eroticism)		AE emotional abuse		Police 955
CC contraception		AS sexual abuse		Paramedics 961
HS sexual harassment		AF physical abuse		Fire dept. 981
GV pregnancy		NG neglect	TR2	Referral to other institutions or services
TS sexually transmitted diseases		EXM labor exploitation		(provides information)
Interpersonal relationships		EXS sexual exploitation	TR3	Referral to the "face-to-face" counseling center
FA family		TF trafficking		(requests first name, last name, address, phone number)
PC friends/colleagues	TPL	Spare time	CLI	Client ends call
PA partner		SP sports	CON	Client has been counseled
DS problems w ith child disciplining		CA arts and culture (film, books, opera,	CIC	Counselor ends call
DS problems w ith child disciplining		museum)	NON	Non-intervention for that call (call requesting CH
Self		TU tourism		information, not a beneficiary from the target population)
DZ development		JN gambling	AMI	Postponement
IM self image		PL boredom	ALT	Other
IS sexual identity	SOC	Social		DIFFICULTIES FOR THE COUNSELOR
Violence		BS goods/services	CMU	The counselor is unable to handle the client/foul language
AT attempt, threat, attack		IS social isolation		The counselor does not understand the message, the
VIF domestic violence	MAT	Material		counselor and the client are of different nationality and
VL rape		AJ employment/professional guidance		do not speak the same language
Emotional		FI financial	RLT	A relationship of trust is not established
ST stress, emotional crisis, remorse, loss of loved ones, death		LC housing	ATP	The counselor does not approach all sides of the problem
SG loneliness	LEG	TR transportation		The counselor simplifies the problem, the counselor is
SD suicide		DC rights of the children	INF	unable to identify the central problem
AF self-flagellation		DO human rights		The counselor does not have sufficient informative
Alcohol/drug abuse	MED	Medical		materials available
CA alcohol abuse (family/client)		HS HIV/SIDA		Inadequate structure of the materials
CD drug abuse (family/client) - including smoking		FZ physical		Counselor ID:
School		PS psychological		
IV learning	COM	Behavior disorders		LN FN S Y Y M M D D
OS school guidance		DV delinquency		S - sex M - 1; F - 2
HE psychological, emotional and/or physical harassment of one student by another	APA	FG runaway from home		Date:
PE teacher(s)-student(s) relationships		Belonging		D D M M Y Y
AB absenteeism (not allowed by parents, unmotivated absenteeism, motivated absenteeism - illness)	ALT	BG gangs		
		Other (undefined: swearing, crying, only salutes etc.)		

APPENDIX 2

MANDATORY MINIMUM STANDARDS FOR THE COUNSELING CENTER FOR THE ABUSED, NEGLECTED AND EXPLOITED CHILD

The counseling center for the abused, neglected and exploited child, further referred to as CC, is a child protection service aimed at providing emotional support, working on trauma and its consequences, as well as enabling clients to obtain the necessary changes in order to adjust to their life environment.

The clients of this service may be:

- Children exposed to situations of abuse, neglect and exploitation – children at risk or child-victims
- The protecting parent – the parent who is not the perpetrator of child abuse, neglect and exploitation actions
- The members of the child's family, including the extended family and the parent who uses abusive child disciplining and educating methods and practices
- The caretaker – individual other than the parents who bears the responsibility for the child's upbringing and care, e.g. the professional maternal assistant (the Foster parent)
- The aggressor – the individual under criminal investigation or convicted for offenses relating to abuse, neglect and exploitation
- The child's legal representative

The clients will be able to access this service directly or through referral from the specialized public service for child protection, further referred to as SPSCP, and/or through decision of the child protection commission.

The present standards are complemented by the following documents:

1. Mandatory minimum standards for the children's hotline;
2. Mandatory minimum standards for the community resource center for the prevention of child abuse, neglect and exploitation;
3. Methodological guide for multidisciplinary team and network intervention and prevention in child abuse, neglect and exploitation situations.

The standards are grouped on the following areas of interest:

Advocacy and community relationships

1. Advocacy activities

Client counseling

2. Personalized counseling plan
3. The counseling activity
4. Aggressor counseling

Administration and management

5. Location, financial resources and facilities
6. Procedures

Human resources

7. Recruitment and employment
8. Number of staff members, background and ongoing training
9. Supervision

Activity in the intervention network

10. Activity in the intervention network

ADVOCACY AND RELATIONSHIPS WITH THE COMMUNITY

Standard #1

Advocacy

The counseling center develops advocacy and promotion activities for the services provided in the best interest of the children exposed to abuse, neglect and exploitation

Result

The community is informed and involved in the solving of child abuse, neglect and exploitation cases.

Implementation procedures for Standard #1

1.1 The CC develops promotional materials for children, parents, professionals and other members of the community containing relevant information regarding its role in the community, method of access and operation.

1.2 The CC supports annual advocacy, education and communication campaigns for the community regarding the issue of child abuse, neglect and exploitation, further referred to as A/N/E.

1.3 The CC publishes relevant data in the media, on a regular basis. The content of the materials released to the public is previously approved by the service coordinator.

1.4 The service coordinator ensures that during media exposure the legislation in force regarding the child's protection in relation to the media and the provisions of the present mandatory minimum standards regarding the confidentiality of client data are strictly respected.

Indicators for Standard #1

(I)1.1.1 The CC possesses promotional materials (for example flyers, brochures).

(I)1.1.2 The content of the promotional materials is adequate for the target group (for example children, parents, professionals, media).

(I)1.2 The annual number of advocacy, education and communication campaigns CC has been involved in.

(I)1.3.1 The annual number of published articles containing relevant data from the CC activity.

(I)1.3.2 The content of published materials, which need to carry the signature of the service coordinator.

(I)1.4 The CC coordinator and the specialty personnel are aware of the legislation in force in his field.

THE PERSONALIZED COUNSELING PLAN

Standard #2

The personalized counseling plan

Based on the information obtained from the initial detailed assessment of the child abuse, neglect and exploitation case, the counselor responsible creates a personalized counseling plan for the child and, as needed, for the individuals involved in the respective case.

Result

The clients are provided with personalized intervention in the shortest time after the case intake by the counseling center.

Implementation procedures for Standard #2

2.1 The responsible counselor creates for each client a personalized counseling plan (further referred to as PPC) endorsed by the CC coordinator. The PPC is created for the child and all the other individuals involved in the respective A/N/E case; the previous plans are appendices of the child's PPC.

2.2 In creating and implementing the PPC the following principles are observed: securing the child, diminishing the consequences and avoiding his/her exposure to new abuse.

2.3 The counselor ensures that the child, together with his/her family or, in lack thereof, the caretaker and/or legal representative, is consulted and actively involved in the PPC creation, decision making and implementation process, according to his/her maturity level.

2.4. All objectives included in the PPC are revealed to the child in an accessible manner according to his/her maturity level, as well as that of his/her family or, in lack thereof, that of the caretaker and/or legal representative.

2.5 The PPC is revised when the therapeutic objectives no longer match the client's needs and this is recorded in the counseling register and the individual counseling form.

2.6 On a regular basis – at least monthly or whenever necessary – the responsible counselor must send the case manager from the SPSCP reports detailing the fulfillment of the objectives included in the service plan, as well as any modification occurred in the personalized counseling plan and in the child's situation. The reports are created based on a unique protocol approved by the SPSCP director. The service plan is created by the multidisciplinary team assembled at the initiative of the case manager.

2.7 The case manager from the SPSCP, in his/her turn, has the obligation to inform the members of the multidisciplinary team of any modification in the child's situation affecting the fulfillment of the objectives included in the service plan that may affect the intervention plan and the personalized counseling plan, respectively.

2.8 Upon completion of the counseling activity, the responsible counselor provides case monitoring for a period of at least 6 months.

Indicators for Standard #2

(I)2.1 The average monthly number and the annual number of personalized counseling plans and checking against the center's counseling register.

(I)2.5 Verifying the counseling register and the individual counseling forms.

(I)2.6 – (I)2.8 The methodology of the counseling center and the cooperation agreement with the SPSCP.

Standard #3

The counseling activity

The counseling provided in child abuse, neglect and exploitation cases is part of the service plan created by the multidisciplinary team assembled at the initiative of the case manager from the specialized service for child protection.

Result

The clients are provided with specialized individual and/or group counseling services.

Implementation procedures for Standard #3

3.1 The counseling will be initiated in maximum 72 hours after logging the case in the counseling register, taking into account the gravity of the situation and the number of active cases per counselor.

3.2 The counseling activity takes place individually and/or in group or in a specially designed, securing location for the client; the duration of a counseling session is maximum 45 minutes.

3.3 The counseling is a planned activity, with specific objectives, which are negotiated with the clients in the case of group counseling.

3.4 The counseling is provided based on a contract with the family; the model and particularized content for each individual case are approved by the CC coordinator. The mentioned model is adapted as recommended in the order of the Secretary of State of the National Authority for Child Protection and Adoption, the minister of education and research, the minister of health and family and the president of the National Authority for Persons with Disabilities no. 18/3.989/416/142 on the approval of the methodological guide for the assessment of children with disabilities and inclusion in a certain degree of disability.

3.5 During the entire counseling activity, the children who have attained the age of 10, as well as their family or, as case may be, the protecting parent or the legal representative of the child are granted access to the data in the child's counseling file solely if this does not contravene the child's best interest. In case that some of the data in the file may endanger the child's development and security, the CC coordinator may decide to restrict the access to such data of the aforementioned persons on a determined period of time; this is recorded by the responsible counselor in the child's counseling file along with the motivation for such measure.

3.6 The data in the child's counseling file are confidential and may not be disclosed to other professionals who are not part of the multidisciplinary team, except for the provisions of the Criminal Procedure Code.

Indicators for Standard #3

(I)3.1 – (I)3.2 Verifying the counseling register.

(I)3.2.1 The average monthly number and the annual number of counseling sessions with the children.

(I)3.2.2 The average monthly number and the annual number of counseling sessions with the families.

(I)3.2.3 The average monthly number and the annual number of counseling sessions with the protecting parents.

(I)3.2.4 The average monthly number and the annual number of counseling sessions with the caretakers.

(I)3.2.5 The average monthly number and the annual number of counseling sessions with the aggressors.

(I)3.3.1 The average monthly number and the annual number of individual counseling sessions.

(I)3.3.2 The average monthly number and the annual number of group counseling sessions.

(I)3.4 The personalized counseling plans are signed by the clients.

(I)3.5 The contracts with the family.

(I)3.6 The average monthly number and the annual number of cases for which access to certain data in the child's counseling file has been temporarily restricted by the CC coordinator.

Standard #4

Aggressor counseling

The counseling center for the abused, neglected and exploited child provides or ensures access to counseling services for aggressors.

Result

The aggressors have access to counseling services in order to make them responsible for the child abuse, neglect and exploitation situations and to change their behaviors and abusive practices.

Implementation procedures for Standard #4

4.1 The case manager from the SPSCP initiates the necessary steps to complete the aggressor's assessment and counseling. The aggressor's assessment and counseling take place with his/her written consent or at the request of the courthouse and it is conducted by specialty staff trained to this purpose.

4.2 The CC informs the aggressor in respect to the counseling services available in the center or provided by other service providers.

4.3 Before the commencement of the counseling per se, the aggressor must be assessed from a psychological point of view. The assessment is conducted by a professional from the multidisciplinary team assembled at the initiative of the case manager from the SPSPC or, in his/her absence, by the responsible counselor from the CC. In the first situation, the case manager is obligated to send a copy of this assessment to the counselor responsible with the aggressor's counseling, who has the obligation to cooperate with the counselor from the CC responsible with the creation of the PPC for the child.

4.4 The responsible counselor must identify the immediate risk factors for the aggressor based on risk assessment tools approved by the SPSCP director.

4.5 The aggressor's counseling is conducted in a secured location and conditions for the counselor, according to the court's decision.

4.6 Group counseling for the aggressor is conducted in the presence of a counselor with a minimum of 3 years experience in probation services.

4.7 During the entire counseling for the aggressor, the responsible counselor takes the necessary measures to avoid the aggressor meeting with the child.

Indicators for Standard #4

(I)4.1 Written consents from the aggressors and the court's requests for the counseling of the aggressors.

(I)4.3 The aggressor's psychological assessment forms, part of the child's file.

(I)4.4 The risk assessment forms, part of the child's file.

(I)4.5 The counseling center's methodology lists the conditions and procedures when counseling aggressors.

(I)4.6 Employment contracts.

ADMINISTRATION AND MANAGEMENT

Standard #5

Location, financial resources and facilities

The counseling center for the abused, neglected and exploited child has a location accessible to the members of the community, sufficient financial resources and adequate facilities ensuring its operation at optimum efficiency and permanency in the community.

Result

The children and families in the community have access to a specialty service based on identified needs.

Implementation procedures for Standard #5

5.1 The CC is located in an accessible place for all the members of the community, taking into account the means of transportation and distance to other community services for children and families.

5.2 The CC is partitioned and provided with facilities and equipment that facilitate accessibility, work in optimum conditions with the beneficiaries, both children and adults, communication and work in a multidisciplinary team, room with special mirror window for unidirectional viewing, audio-video recording of interviews with children, as well running other activities listed in the mandatory minimum standards.

5.3 The funds allocated to the CC by the service provider (SPSCP, authorized private bodies or authorities of the local government) are sufficient for the fulfillment of the CC's mission, and the provisions of the current mandatory minimum standards, including providing the necessary funds for the intervention of professionals with experience in aggressor group counseling and for the external supervision of the counselors.

5.4 The center's coordinator has the responsibility to provide additional funding sources, especially by identifying and mobilizing community resources, to ensure the completion of the necessary activities in the community and the CC's long term self-sufficiency.

5.5 The center's coordinator has the responsibility to overview the use of CC run funds.

5.6 The employer ensures that the CC has all the necessary authorizations, under the legislation in force, including those from the health system for providing medical and related services.

5.7 The CC may provide psychotherapy services observing the healthcare system legislation in force, including the provisions on authorization and training specialty staff.

Indicators for Standard #5

(I)5.1.1 The members of the community have different means of access to the center.

(I)5.1.2 The center is provided with facilities for people with disabilities, according to the legislation in force.

(I)5.2 The center has departments adequate to their purpose, including a waiting room with specific material for child play, for running the activities listed in the mandatory minimum standards.

(I)5.3 – (I)5.5 The annual budget of the CC.

(I)5.6 The center's authorizations.

(I)5.7 The methodology, authorizations, personal file of the psychotherapists employed by the CC.

Standard #6

Procedures

The counseling center for the abused, neglected and exploited child possesses a set of procedures that ensure its operation according to the mandatory minimum standards.

Result **The clients of the counseling center are provided with quality services, in conditions of safety and confidentiality.**

Implementation procedures for Standard #6

6.1. The CC coordinator is responsible to put the center's mission in writing, to post, disseminate and advocate it both within the service and the community.

6.2 The CC has an internal rulebook or internal operation norms, based on the employer, who reflect the spirit of democratic values of respect for the rights of the child and the individual; these are approved by the CC coordinator and made known to the entire staff.

6.3 The CC's operation is based on a methodology approved by the center's coordinator and created in compliance with the provisions of the mandatory minimum standards and the methodological guide for the intervention and prevention in a multidisciplinary team and in network in A/N/E situations.

6.4 The CC coordinator assigns the cases either following direct requests, or referrals by the SPSCP.

6.5 Direct requests may be made either by the child's family, protecting parent or, in their absence, by the caretaker or legal representative, or by the child himself/herself. In this situation, the responsible counselor has the obligation to make an initial assessment of the case and if he/she suspects or identifies A/N/E situations then he/she must signal these cases to the competent authorities (SPSCP, police, the public social work service from the Local Councils of the municipalities, towns and sectors of the Bucharest municipality, district attorney's office), in compliance with the legislation in force.

6.6 The referral is made by the case manager from the SPSCP when the counseling service is part of the service plan realized by the multidisciplinary team.

6.7 The CC coordinator distributes the cases so that one counselor will not be involved in more than 12 active A/N/E cases simultaneously.

6.8 The CC possesses a database for the recording, monitoring and assessment of its own activities, used under the provisions of the legislation in force in respect to the access to information and ensuring the confidentiality of client information.

6.9 All the employed counselor of the CC, as well as the professionals involved in the center's activity at some point sign confidentiality clauses regarding the information on the center's clients.

Indicators for Standard #6

(I)6.1 The mission of the center is displayed in a suitable place, it is known by the center's staff and advocated in the community using specific means (e.g. flyers, brochures, etc).

(I)6.2 The center's rulebook, or the internal operation norms respectively, are available to and known by the center's staff.

(I)6.3 The CC's operating methodology is available to and known by the center's staff and the professionals involved in the intervention network.

(I)6.4.1 The average monthly number and the annual number of direct requests.

(I)6.4.2 The average monthly number and the annual number of referrals from the SPSCP.

(I)6.5 The average monthly number and annual number of cases notified to the competent authorities: total number and detailed on the categories listed in the mandatory minimum standards (SPSCP, police, the social work public service from the Local Councils of the municipalities, towns and sectors of the Bucharest municipality, district attorney).

(I)6.7 Verifying the caseload.

(I)6.8.1 The center's database is operational.

(I)6.8.2 The CC has a clear system for the utilization of the database by the center's staff in respect to the access to information and ensuring the confidentiality of the clients.

(I)6.9 Confidentiality contracts.

HUMAN RESOURCES

Standard #7

Recruitment and employment

The staff of the counseling center for the abused, neglected and exploited child is carefully and responsibly selected through a recruitment and employment process taking place in compliance with the legislation in force and meeting the needs of the center.

Result

The clients are provided with quality services by qualified staff.

Implementation procedures for Standard #7

7.1 The employer has the obligation to employ qualified staff that will meet the requirements of the mandatory minimum standards. If the CC operates in a geographical area with communities of ethnic minorities, it is recommended that the CC team of counselor also included professionals speaking the language of those minorities.

7.2 The recruitment and employment process is recorded and the CC coordinator has decision-making abilities for the staff selection process.

7.3 The employer may have a certain type of staff serving the CC mission without them being part of the own staff of the center, but he/she has the obligation to ensure the employment of the specialty staff and the volunteers.

7.4 The specialty staff is represented by counselors who must have a University degree in social work or psychology and at least one-year experience in the child protection sector.

7.5 The center's coordinator must have a University degree in social-human studies and at least two years experience in child and family services.

Indicators for Standard #7

(I)7.1 Diplomas and other documents attesting the qualifications of the staff employed.

(I)7.2 The recruitment and employment process complies with the legislation in force and the provisions of the mandatory minimum standards.

(I)7.3 – (I)7.7 The organizational chart, the diplomas, the labor contracts, the volunteering contracts, the job descriptions. It will be verified to what extent the job descriptions are known by the employees and if they are revised in compliance with the legislation in force.

Standard #8

Number of staff, background and ongoing training

The human resources of the counseling center for the abused, neglected and exploited child are sufficient in number, have the appropriate background and abilities to work in a multidisciplinary team and in an inter-agency network.

Result

The children and families in the community are provided with quality and personalized services by well-trained professionals, with empathic and communication abilities.

Implementation procedures for Standard #8

8.1 The number of staff must be adequate for the fulfillment of the activities listed in the mandatory minimum standards. The employer together with the center's coordinator set the minimum number, which is recorded and revised at least once every year.

8.2 When employed, if lacking initial training in the sector of child protection against abuse, neglect and exploitation, each professional, including the center's coordinator, are provided with training in this field, supported from employer's budget.

8.3 In the shortest time possible after employment, if lacking training in specific work techniques with children exposed to A/N/E and with their families, the counselors are provided with at least 60 hours of training in this field, supported from the employer's budget.

8.4 In the shortest time possible following employment, if lacking training in specific work techniques with the aggressors, the specialty staff who provide counseling for the aggressors must be provided with at least 90 hours of training in this field, supported from the employer's budget.

8.5 Each employer of the center, including its coordinator, are provided with at least 42 hours of ongoing training per year in the field of child protection against abuse, neglect and exploitation or in related fields, supported from the employer's budget.

8.6 The center's counselors are provided with at least 42 hours per year of ongoing training in the field of counseling and therapy for children, or for the aggressor respectively, supported from the employer's budget.

8.7 The permanent education of the specialty staff, as well as the ongoing professional training of the entire staff of the CC will be promoted, supported and recorded by the CC's coordinator.

8.8 The volunteers of the service act based on clear contracts, in compliance with the legislation in force.

8.9 When employed, if lacking training in the management of social services, the center's coordinator is provided with training in this field, supported from the employer's budget.

8.10 The coordinator is provided with at least 21 hours of training in service management per year, supported from the employer's budget.

8.11 The permanent education and ongoing training of the employees are conducted in compliance with the legislation in force, through courses organized in the educational, medical and adult professional training system.

Indicators for Standard #8

(I)8.1.1 The number of staff is adequate for the activities listed in the mandatory minimum standards and recorded.

(I)8.1.2 The ration between the annual number of direct requests and referrals from the SPSCP and the number of counselors and volunteers.

(I)8.2 – (I)8.10 The personal file of each employee, including that of the service coordinator and the volunteers, includes the document required by the legislation in force, including the graduation certificates for the initial and ongoing training listed in the mandatory minimum standards.

(I)8.11 The graduation certificates with national recognition and those with recognition from the employer. For the latter, the manner in which the training program was organized using the criteria listed in the legislation regulating the professional training of the adult.

Standard #9

Supervision

The counseling center for the abused, neglected and exploited child possesses an efficient system for the supervision of the human resources that allows its operation at optimum efficiency and ensures its permanency in the community.

Result

The staff are motivated and efficient, providing quality services to the clients.

Implementation procedures for Standard #9

9.1 Supervision meetings with the staff take place periodically – at least once a week or whenever necessary – and are recorded.

9.2 The supervision meetings take place individually or in a team.

9.3 The Centers' coordinator has the obligation to provide the internal and external supervision of the specialty staff and the volunteers.

9.4 The supervision of the volunteers is provided by an experienced counselor appointed by the center coordinator.

9.5 The employer has the obligation to provide the supervision of the center coordinator.

9.6 The supervision is conducted by professionals with a University degree in social-human studies with training in supervision and at least 2 years experience in child and family services. The supervision of the counselors is done by professionals with a University degree in social-human studies with at least 2 extra years of experience in counseling than the supervised.

Indicators for Standard #9

(I)9.1 The average monthly number and the annual number of staff supervision meetings.

(I)9.2 – (I)9.5 The average monthly number and the annual number of individual and group supervisions for the counselors, volunteers and center's coordinator.

(I)9.6 Recorded documents pertaining to supervision.

ACTIVITY IN THE INTERVENTION NETWORK

Standard 10 **The counseling center for the abused, neglected and exploited child cooperates permanently with the professionals, the authorities of the local government and the specialty services from the intervention network in cases of child abuse, neglect and exploitation.**

Result **The children and their families are provided with the support and the services of the counseling center in the purpose of rehabilitation and community reintegration.**

Implementation procedures for Standard #10

10.1 The activity in the inter-agency network of intervention in child abuse, neglect and exploitation cases is conducted in compliance with the provisions of the methodological guide for multidisciplinary team and network intervention and prevention in A/N/E situations.

10.2 The CC staff suspecting or identifying A/N/E situations from the direct requests must notify these cases to the competent authorities (SPSCP, police, social work public service from the Local Councils of municipalities, towns, and sectors of the Bucharest municipality, district attorney's office), in compliance with the legislation in force.

10.3 The specialty staff from the center provide the initial assessment of the A/N/E situation they notify to the SPSCP; the results are recorded in the mandatory notification and initial assessment form for the A/N/E situation. The forms are conveyed to the SPSCP in maximum 48 hours after the initial assessment, or 24 hours after filing them out respectively, in the purpose of creating the primary record of these situations and coordinating the intervention.

10.4 The specialty staff from the center may participate in the detailed assessment of the cases notified by them, at the request of the SPSCP.

10.5 The specialty personnel from the center may participate in the initial assessment of other A/N/E cases, including emergency situations from the community where the center operates, at the request of the SPSCP. The initial assessment of the emergency situations is also done at the request of the counselors from the Children's Hotline.

10.6 The specialty staff involved in the assessment, irrespective of the institution they come from, utilize a set of work instruments created based on the provisions of the current mandatory minimum standards and the methodological guide on multidisciplinary team and network intervention and prevention in A/N/E situations. The set of instruments is agreed upon by mutual consent by all the partner agencies in the intervention network. This may be improved and developed based on the experience and methodology existing in the specialty literature.

Indicators for Standard #10

(I)10.1 The CC methodology and the annual number of cooperation agreements with the authorities of the local government and the institutions and services in the intervention network.

(I)10.2 The average monthly number and the annual number of cases notified to the competent authorities: total number and detailed on the categories listed in the mandatory minimum standards (SPSCP, police public social work service from the Local Councils of municipalities, towns and sectors of the Bucharest municipality, district attorney's office).

(I)10.3 The average monthly number and the annual number of mandatory notification and initial assessment forms conveyed to the SPSCP.

(I)10.4 The average monthly number and the annual number of cases assessed in detail by the specialty staff of the center out of the cases notified by the center.

(I)10.5.1 The average monthly number and the annual number of cases assessed initially by the specialty staff of the center, at the request of the SPSCP.

(I)10.5.2 The average monthly number and the annual number of cases assessed in detail by the specialty staff of the center, at the request of the SPSCP.

(I)10.6 The set of agreed instruments and the collaboration conventions stipulating this fact.

Standard #11

Interview with the child

The counseling center for the abused, neglected and exploited child provides an adequate environment for interviewing the child by the specialty staff from the intervention network.

Result **The multidisciplinary intervention conducted in abuse, neglect and exploitation situations is adequate and securing for the child, by avoiding and preventing revictimizing the child through repeated interviews.**

Implementation procedures for Standard #11

11.1 As needed, the CC records the documents testifying the presence of lesions and other consequences of the A/N/E on the child, including photographing, as well as audio-video recording of the interviews with the child during the detailed assessment in the mirror-window room.

11.2 All recordings, including photography, are carried out after informing and securing the child's consent taking into account his/her maturity level, as well as after informing and securing the written consent of the family or, as appropriate, that of the protecting parent or, in lack thereof, that of the child's legal representative.

11.3 At the request of the child over 14, the interview may take place without the consent or presence of the family or, as appropriate, that of the protecting parent or, in lack thereof, that of the child's caretaker or legal representative.

11.4 The professional conducting the interview may decide, on a case by case basis, to interview the child in the absence of the family, or as appropriate, in the absence of the protecting parent or, in lack thereof, of the child's caretaker or legal representative, except for the provisions of the Criminal Procedure Code.

11.5 All interviews with the child carried out during the detailed assessment in the purpose of revealing A/N/E or during criminal investigation procedures are conducted in the mirror-window room in the presence of a member of the multidisciplinary team.

11.6 The records may not be used as teaching material unless the consent of the child and of the legal representative is secured and in strict compliance with the legislation in force on the right to privacy and image, as well as other relevant provision in this field. Audio-video teaching materials may be created using information from the recordings, respecting the confidentiality of the parties involved in the respective cases.

11.7 The interview with the child may be also carried out by professionals from outside the CC who are part of the multidisciplinary team, if the provisions of the current mandatory minimum standards are complied with.

11.8 The interview of the child in serious A/N/E and sexual abuse/exploitation situations is carried out based on distinct protocols corresponding to the two situations invoked, approved by the SPSCP director.

Indicators for Standards #11

(I)11.1 The CC possesses photography, audio-video recording facilities and a mirror-window room.

(I)11.2.1 The requirement to record and secure the child's consent is clearly mentioned in the CC methodology.

(I)11.2.2 Documenting the written consent of the individuals mentioned in the mandatory minimum standard.

(I)11.6 Use of the recordings as teaching materials.

(I)11.7 The average monthly number and the annual number of cases in which interviews have been conducted by professionals from outside the CC.

(I)11.8.1 Interviewing protocols for the two A/N/E situations listed in the mandatory minimum standards signed by the SPSCP director.

(I)11.8.2 The content of the protocols.

APPENDIX 3

MANDATORY MINIMUM STANDARDS FOR THE COMMUNITY RESOURCE CENTER FOR THE PREVENTION OF CHILD ABUSE, NEGLECT AND EXPLOITATION

The resource center for the prevention of child abuse, neglect and exploitation, further referred to as CRC, is a child protection service aiming at running, advocating and maintaining in the community primary, secondary and tertiary prevention activities that will contribute to provide a balanced development for all the children in the community.

The present standards are complemented by the following documents:

1. Mandatory minimum standards for the children's hotline;
2. Mandatory minimum standards for the counseling center for the abused, neglected and exploited child;
3. Methodological guide for multidisciplinary team and network intervention and prevention in child abuse, neglect and exploitation situations.

The standards are grouped on the following areas of interest:

Advocacy, education and communication

1. Advocacy, education and communication activities
2. Parent education programs

3. Community reflection group

Support activities

4. Support activities

Administration and management

5. Location, financial resources and facilities
6. Management and administration
7. Annual action plan

Human resources

8. Recruitment and employment
9. Number of staff members, background and ongoing training
10. Management and supervision

Activity in the intervention network

11. Activity in the intervention network

ADVOCACY, EDUCATION AND COMMUNICATION

Standard #1

Advocacy, education and communication activities

The community resource center organizes advocacy, education and communication activities at the level of the community, in the field of child abuse, neglect and exploitation prevention.

Result

The community is made aware of the child abuse, neglect and exploitation issue and has access to specialty and general interest information on the child and family, as well as on the services they may access.

Implementation procedures for Standard #1

1.1 CRC initiates, organizes and supports annual community advocacy, education and communication campaigns on the child abuse, neglect and exploitation prevention, further referred to as A/N/E, and on other areas of interest, in accordance with its mission.

1.2 The campaigns are based on the initial assessment of the need for preventive action and end through and assessment of the impact on the community.

1.3 The CRC keeps an annual record of all A/N/E campaigns organized by it, in which it has been involved and which is aware of.

1.4 During the campaigns organized by the center or in which the center is involved, the CRC records relevant data in reports, based on a protocol approved by the center coordinator.

1.5 The CRC owns and organizes the specialty information in a library, which is then made available to the professionals and other individuals interested in A/N/E prevention.

Indicators for Standard #1

(I)1.2.1 The method used for the initial assessment of the need for preventive action for the initiation of the campaign.

(I)1.2.2 The method used for the assessment of the impact of the campaign in the community.

(I)1.3 The recorded number of advocacy, education and communication campaigns organized annually in the community: total number and on the main categories listed in Standard #1 (organized by the center, supported by the center and known by the center).

(I)1.4.1 The number of reports on the campaigns organized by the center.

(I)1.4.2 The protocol used to write the reports.

(I)1.5.1 The existence and functioning of the specialty library.

(I)1.5.2 The annual number of library users.

Standard #2

Parent education programs

The community resource center organizes parent education programs, in the field of preventing abusive child upbringing and education practices and methods

Result

The community is aware of the consequences of abuse, neglect and exploitation on the development of the child and maintains a close communication relationship with the staff of the community resource center.

Implementation procedures for Standard #2

2.1 The education programs for parents – known as “schools for parents” – take place in accordance with a curriculum created in compliance with the legislation in force and based on the needs identified in the community.

2.2 The training curriculum must be advocated by the CRC before the initiation of the parent education program.

2.3 The CRC organizes at least one parent training cycle during one year.

Indicators for Standard #2

(I)2.1.1 The content of the parent training program.

(I)2.1.2 The method for organizing the parent education program, in compliance with the legislation in force specific to the educational, medical and adult professional training system.

(I)2.3 The annual number of parent training cycles organized by the center.

Standard #3 **The community reflection group
The community resource center organizes and supports the
functioning of a community reflection group able to intervene
efficiently in child abuse, neglect and exploitation situations.**

Result **The community is taking responsibilities in the spirit of
solidarity and social cohesion on the issues of abuse, neglect
and exploitation.**

Implementation procedures for Standard #3

3.1 The community reflection group functions periodically or whenever necessary; is comprises, at a minimum, the formal and informal community leaders relevant for the center's activity.

3.2 The community reflection group has the following main responsibilities: a) identifies community needs and resources for the prevention of child abuse, neglect and exploitation; b) discusses situations, practices, solving mechanism and how they function in the community and c) submits proposals to the CRC to mobilize community resources in the purpose of preventing A/N/E.

3.3 The CRC keeps an annual record of the community reflection group meetings; the group facilitators have the obligation to record relevant data on the content of the meetings, in accordance with a protocol established by the center.

3.4 The participants to the meetings of the community reflection group sign confidentiality agreements in respect to the child and family information discussed during such meetings.

Indicators for Standard #3

(I)3.3.1 The recorded annual number of meetings of the community reflection group.

(I)3.3.2 The protocol based on which relevant data about the meetings of the community reflection group is recorded.

(I)3.3.3 The annual number of protocols of the meetings of the community reflection group.

(I)3.3.4 The content of the aforementioned protocols.

(I)3.4 The confidentiality agreements.

SUPPORT ACTIVITIES

Standard #4 **The community resource center runs support activities for parents and children, as well as for other members of the community.**

Result **The children and their families have access to support services and programs integrated in the community for the prevention of child abuse, neglect and exploitation situations or to overcome such situations.**

Implementation procedures for Standard #4

4.1 The CRC assembles and coordinates support groups for parents and children, as well as for the couples or individuals who are to become parents.

4.2 The CRC keeps a record of the support groups organized; the group facilitators have the obligation to record relevant data on the groups, based on a protocol created by the center.

4.3 The CRC supports and organizes support programs for parents and children, other than the support groups mentioned earlier, as well as for couples or individuals who are to become parents, based on the needs identified in the community.

4.4 The CRC supports the mandatory home visit program for pregnant women and parents with children under one, who are in the responsibility of the family physician and/or the community nurses.

4.5 The CRC initiates and organizes specific support programs, integrated in the community, for children identified in risk of abuse, neglect and exploitation, in the purpose of increasing their resilience.

4.6 The identification of risk situations is done with instruments adapted after the models recommended by the methodological guide for multidisciplinary team and network intervention in A/N/E situations.

4.7 The CRC may refer cases of children in risk of abuse, neglect and exploitation to other community services or programs matching the identified needs.

4.8 The CRC keeps a record of all support programs, including the specific ones, organized by the center or in which the center is involved, clearly mentioning the ones organized by the center.

4.9 The CRC provides the assessment and documentation of the efficiency of the support programs organized by the center.

Indicators for Standard #4

(I)4.2.1 The annual number of support groups organized by the center: total number and detailed on the main categories listed in procedure 4.1 (support groups for parents, for children, for couples or individuals who are to be parents).

(I)4.2.2 The protocol based on which relevant data on the support groups is recorded.

(I)4.2.3 Annual number of the aforementioned protocols.

(I)4.2.4 Content of the aforementioned protocols.

(I)4.4 The number of beneficiaries of the mandatory home visit program who are directly helped by the center.

(I)4.6 A/N/E risk assessment form.

(I)4.7 The number of A/N/E risk cases referred to other community services.

(I)4.8.1 The annual number of support programs, including specific ones, organized or supported by the center.

(I)4.9.1 The assessment methods for each support program organized by the center.

(I)4.9.2 Documentation attesting the efficiency of the support programs organized by the center.

ADMINISTRATION AND MANAGEMENT

Standard #5

Location, financial resources and facilities

The counseling center for the abused, neglected and exploited child has a location accessible to the members of the community, sufficient financial resources and adequate facilities ensuring its operation at optimum efficiency and permanency in the community.

Result

The children and families in the community have access to quality community services they can access based on their needs.

Implementation procedures for Standard #5

5.1 CC is located in an accessible place for all the members of the community, taking into account the means of transportation and distance to other community services for children and families.

5.2 CC is partitioned and provided with, or has access to, clearly stipulated in the cooperation agreements with other agencies or services, facilities and equipment that facilitate accessibility, work in optimum conditions with the beneficiaries, both children and adults, as well running the activities listed in the compulsory minimum standards.

5.3 The funds allocated to the CRC by the service provider (the specialized public service for child protection, further referred to as SPSCP, authorized private bodies or authorities of the local government) are sufficient for the fulfillment of the CRC mission, the provisions of the current mandatory minimum standards, and any other activities conducted by the CRC in compliance with the legislation in force and the needs identified in the community.

5.4 The center coordinator has the responsibility to provide additional funding sources, especially by identifying and mobilizing community resources, in order to ensure the execution of the necessary activities in the community and the CRC long term self-sufficiency.

5.5 The center coordinator has the responsibility to overview the use of CRC run funds.

Indicators for Standard #5

(I)5.1.1 The members of the community have various means of access to the center.

(I)5.1.2 The center is provided with facilities for people with disabilities, according to the legislation in force.

(I)5.2.1 The center has departments adequate to their purpose, including a waiting room with specific materials for child play, for running the activities listed in the mandatory minimum standards.

(I)5.2.2 The center has closed cooperation agreements with other institutions or services for using locations or renting equipment adequate for the activities listed in the annual action plan and the mandatory minimum standards.

(I)5.3 – (I)5.5 The annual budget of the CRC.

Standard #6

Management and administration

The community resource center has an efficient management and administration that ensure its optimum functioning in accordance with its mission.

Result

The children and families from the community are provided with quality services by the community resource center, as well as with the center's support for accessing other services they require at a certain time.

Implementation procedures for Standard #6

6.1. The CRC coordinator is responsible to put the center's mission in writing, to post, to disseminate and advocate it both within the center and the community.

6.2 The CRC has an internal rulebook or internal operation norms, based on the employer, who reflect the spirit of democratic values of respect for the rights of the child and the individual; these are approved by the CRC coordinator and made known to the entire staff.

6.3 The CRC possesses a database for the recording, monitoring and assessment of its own prevention activities, used under the provisions of the legislation in force in respect to the access to information and ensuring the confidentiality of the information on the clients.

6.4 In order to fulfill its mission, the CRC networks with all community, regional and national services and programs for child and family assistance and protection.

6.5 The CRC maintains a permanent contact with the community in order to adjust current activities and programs and to initiate new activities and programs in the field of A/N/E prevention.

Indicators for Standard #6

(I)6.1 The mission of the center is displayed in a suitable place, it is known by the center's staff and advocated in the community using specific means (e.g. flyers, brochures, etc).

(I)6.2 The center's rulebook, or the internal operation norms respectively, are available to and known by the center's staff.

(I)6.3.1 The center's database is operational.

(I)6.3.2 The CRC has a clear system for the utilization of the database by the center's staff in respect to the access to information and ensuring the client confidentiality.

(I)6.4 The annual number of cooperation agreements with the CRC service provider and other service providers and the annual number of programs in which the CRC is involved.

(I)6.5 The CRC operates with diverse methods and means in order to maintain a permanent contact with the community regarding specific service requests, signaling A/N/E needs or situations, etc. (e.g. phone access for this problem, mail box, collection boxes in different locations in the community and others).

Standards #7

The annual action plan

The community resources center operates in compliance with the provisions of an annual action plan created based on the provisions of the mandatory minimums standards and the prevention needs identified in the community.

Result

The children and families in the community are provided with quality services appropriate for their needs.

Implementation procedures for Standard #7

7.1 The center coordinator has the obligation to create an annual action plan based on the provisions of the mandatory minimum standards, after consulting the specialty staff.

7.2 The center's annual action plan will include, as a minimum, the following: a) type of activity, under the provisions of the mandatory minimum standards; b) methodology for the assessment of the initial prevention needs detailed for each activity; c) the individual responsible for the completion of the respective activity; d) time span for running the respective activity; e) available and potential resources.

7.3 The center's annual action plan will be revised periodically or whenever necessary with the approval of the center coordinator.

7.4 Before running any activity, the CRC has the obligation to identify the prevention needs existent at the level of the community in respect to A/N/E, based on a methodology listed in the annual action plan.

Indicators for Standard #7

(I)7.1 The CRC has an annual action plan created by the center coordinator and signed by the specialty staff consulted in that respect.

(I)7.2 The content of the annual action plan complies with the provisions of the mandatory minimum standards.

(I)7.3 The number of revisions of the annual action plan during one year, approved by the center coordinator.

(I)7.4 Needs identified in the community and the methodology used for one or several activities included in the annual action plan, under way at that time.

HUMAN RESOURCES

Standard #8

Recruitment and employment

The staff of the service is carefully and responsibly selected through a recruitment and employment process taking place in compliance with the legislation in force and meeting the needs of the center.

Result

The clients are provided with quality services by qualified staff.

Implementation procedures for Standard #8

8.1 The employer has the obligation to employ qualified staff that will meet the requirements of the mandatory minimum standards and of the annual action plan. If the CRC operates in a geographical area with communities of ethnic minorities, it is recommended that the CRC specialty staff also included professionals speaking the language of those minorities.

8.2 The recruitment and employment process is recorded and the service coordinator has decision-making abilities for the staff selection process.

8.3 The employer may have a certain type of staff serving the CRC mission without them being part of the own staff of the center, but he/she has the obligation to ensure the employment of the specialty staff and the volunteers.

8.4 The specialty staff have social-human studies.

8.5 The center's coordinator must have a University degree in social-human studies and at least two years experience in child and family services.

Indicators for Standard #8

(I)8.1 Diplomas and other documents attesting the qualifications of the staff employed.

(I)8.2 The recruitment and employment process complies with the legislation in force and the provisions of the mandatory minimum standards.

(I)8.3 – (I)8.5 The organizational chart, the diplomas, the labor contracts, the volunteering contracts, the job descriptions. It will be verified to what extent the job descriptions are known by the employees and if they are revised in compliance with the legislation in force.

Standard #9 **Number of staff, background and ongoing training**
The human resources of the community resource center are sufficient in number, have the appropriate background and abilities to work in a multidisciplinary team and in an inter-agency network.

Result **The children and families in the community are provided with quality and personalized services by well-trained professionals, with empathic and communication abilities.**

Implementation procedures for Standard #9

9.1 The number of staff must be adequate for the fulfillment of the activities listed in the mandatory minimum standards and the annual action plan. The employer together with the center's coordinator set the minimum number, which is recorded and revised at least once every year.

9.2 When employed, if lacking initial training in the sector of child protection against abuse, neglect and exploitation, each professional, including the center's coordinator, are provided with training in this field, supported from employer's budget.

9.3 Each employee of the center, including its coordinator, are provided with at least 42 hours of ongoing training per year in the field of child protection against abuse, neglect and exploitation or in related fields, supported from the employer's budget.

9.4 The permanent education of the specialty staff, as well as the ongoing professional training of the entire CRC staff will be promoted, supported and recorded by the center coordinator.

9.5 The volunteers of the center act based on clear contracts, in compliance with the legislation in force.

9.6 The CRC has the obligation to provide minimum 14 hours of training for volunteers before the commencement of their activity.

9.7 The ongoing training of the volunteers will be promoted, supported and recorded by the center coordinator.

9.8 When employed, if lacking training in the management of social services, the center coordinator is provided with training in this field, supported from the employer's budget.

9.9 The coordinator is provided with at least 21 hours of training in service management per year, supported from the employer's budget.

9.10 The permanent education and ongoing training of the employees are conducted in compliance with the legislation in force, through courses organized in the educational, medical and adult professional training system.

Indicators for Standard #9

(I)9.1.1 The number of staff is adequate for the activities listed in the mandatory minimum standards and the annual action plan and recorded.

(I)9.1.2 The number of staff is revised annually; the coordinator is involved when setting and revising the number.

(I)9.2 – (I)9.9 The personal file of each employee, including that of the center coordinator and of the volunteers, includes the documents required by the legislation in force, including the graduation certificates for the initial and ongoing training listed in the mandatory minimum standards.

(I)9.10 The graduation certificates with national recognition and those with recognition from the employer. For the latter, the manner in which the training program was organized will be checked using the criteria listed in the legislation regulating the adult professional training.

Standard #10

Supervision

The community resource center possesses an efficient system for the supervision of the human resources that allows its operation at optimum efficiency and ensures its permanency in the community.

Result

The staff are motivated and efficient, providing quality services to the clients.

Implementation procedures for Standard #10

10.1 Supervision meetings with the staff take place periodically – at least once a week or whenever necessary – and are recorded.

10.2 The supervision meetings take place individually or in a team.

10.3 The center coordinator has the obligation to provide the internal and external supervision of the specialty staff.

10.4 The supervision of the volunteers is provided by the specialty staff with experience appointed by the center coordinator.

10.5 The employer has the obligation to provide supervision for the center coordinator.

10.6 The supervision is provided by professionals with a University degree in social-human studies with training in supervision or at least 2 year experience in child and family services. If the CRC employs counselors for child and family support activities, as well as for tertiary prevention activities, their supervision is done by professionals with a University degree in social-human studies with at least 2 extra years of experience in counseling than the supervised.

Indicators for Standard #10

(I)10.1 The average monthly number and the annual number of staff supervision meetings.

(I)10.2 – (I)10.5 The average monthly number and the annual number of individual and group supervisions for the specialty staff, volunteers and service coordinator.

(I)10.6 Recorded documents pertaining to supervision.

ACTIVITY IN THE INTERVENTION NETWORK

Standard #11 **The community resource center cooperates permanently with professionals, authorities of the local government and specialty services from the intervention network in child abuse, neglect and exploitation situations.**

Result **The children and their families are provided with the support and services of the community resource center with the purpose of rehabilitation and community reintegration.**

Implementation procedures for Standard #11

11.1 The activity in the inter-agency intervention network in child abuse, neglect and exploitation situations are conducted in compliance with the CRC methodology created based on the provisions of the present mandatory minimum standards and the methodological guide for multidisciplinary team and network intervention and prevention in A/N/E situations.

11.2 The CRC staff who suspect or identify A/N/E situations in the community must notify these cases to the competent authorities (SPSCP, police, public social work service from the Local Councils of municipalities, towns and sectors of the Bucharest municipality, district attorney's office) in compliance with the legislation in force.

11.3 The specialty staff from the center provide the initial assessment of the A/N/E situation they notify to the SPSCP; the results are recorded in the compulsory notification and initial assessment form for A/N/E situation. The forms are conveyed to the SPSCP in maximum 48 hours after the initial assessment, or 24 hours after filing them out respectively, in the purpose of creating the primary record of these situations and coordinating the intervention.

11.4 The specialty staff from the center may participate in the detailed assessment of the cases notified by them, at the request of the SPSCP.

11.5 The specialty personnel from the center provide the initial assessment or participate in the comprehensive assessment of other A/N/E cases, including emergency situations, from the community where the center operates, at the request of the SPSCP. The initial assessment of the emergency situations is also done at the request of the counselors from the Children's Hotline.

11.6 The CRC conducts tertiary prevention activities for the cases they notify, at the request of the SPSCP, in accordance with the available human, financial and material resources.

11.7 The CRC is obligated to maintain a monitoring and assessment system of A/N/E cases notified to the competent authorities, including tertiary prevention activities, respecting the confidentiality on the respective cases.

11.8 The monitoring and assessment of A/N/E cases is conducted in compliance with the provisions of the methodological guide for multidisciplinary team and network intervention and prevention in A/N/E situations and the provisions of the mandatory minimum standards for case management in the field of child protection.

11.9 The entire CRC staff, as well as the professionals involved the center's activity at a certain point, sign confidentiality agreements regarding the information pertaining to the clients of the center.

Indicators for Standard #11

(I)11.1.1 The CRC methodology is available and known by the staff of the center.

(I)11.1.2 The annual number of cooperation agreements with the institutions and services from the intervention network.

(I)11.2 The annual number of cases notified to the competent authorities: total number and detailed on the categories listed in the mandatory minimum standards (SPSCP, police, public social work service from the Local Councils of municipalities, towns and sectors of the Bucharest municipality, district attorney's office).

(I)11.3 The annual number of compulsory notification and initial assessment forms conveyed to the SPSCP.

(I)11.4 The annual number of cases assessed in detail by the specialty staff of the center out of the cases notified by the center.

(I)11.5.1 The annual number of cases assessed initially by the specialty staff of the center, at the request of the SPSCP.

(I)11.5.2 The annual number of cases assessed in detail by the specialty staff of the center, at the request of the SPSCP.

(I)11.5.3 The annual number of cases assessed initially by the specialty staff of the center, at the request of the SPSCP and the Children's Hotline.

(I)11.6 The annual number of tertiary prevention activities conducted by the specialty staff of the center out of the cases notified by the center, at the request of the SPSCP.

(I)11.7.1 The existence of an operational monitoring and assessment system for A/N/E situations notified by the center, including tertiary prevention activities, providing proof that this system ensures the confidentiality regarding the respective cases.

(I)11.7.2 The annual number of cases monitored by the specialty staff of the center out of the cases notified by the center to the competent authorities.

(I)11.8 The methodology of the center.

(I)11.9 The confidentiality agreements.