Supervision Tool Caring for Child Survivors Case Management Assessment (CCS-CMA)

Date:	:
Staff	Name:
Supe	rvisor:

Instructions for Administering the Tool

PURPOSE

This assessment represents the minimum standards of child sexual abuse case management competencies required for health and social work staff working directly with child survivors of sexual abuse. Competent care rests on service providers knowing how to provide child-centered case management. This is a staff supervision tool for managers/supervisors to use periodically with staff providing care directly to children and families.

INTRODUCTIONS

- (1) This supervision tool should be performed through a verbal interview between the staff and his/her supervisor in a quiet and confidential location.
- (2) The supervisor should inform the staff person this tool is being used to assess areas where further capacity building is needed. It is not a performance evaluation tool. The supervisor should explain they will receive a score to determine if individual staff member 'meets' the overall case management competency assessment.
- (3) The supervisor asks the staff person to explain/describe the concepts below and score accordingly:
 - Met: If the individual is able to answer the questions correctly and fully, they will receive a mark of 'met'.
 - Partially Met: If the individual is able to answer at least 50% of the question, they will receive a mark of partially met. For example, if the question is, "name the guiding principles for working with child survivors" and the person can only name 4, they will receive a 'partially met' score.
 - Unmet: If the individual is unable to answer the question, they will receive a mark of 'unmet'.
 - (4) Once the assessment is complete, the supervisor will score the assessment and discuss with the staff member his/her scores, what they mean, and any further capacity building needed

Administering the Tool

Case Workers Providing Case Management and/or Psychosocial Services have already Met these Competency Assessments	Yes	No	Not Evaluated
Demonstrate in-depth knowledge about child sexual abuse (as evidenced by the CCS - KA)			
Demonstrate child friendly attitudes and beliefs (as evidenced by the CCS Attitude Scale)			
Demonstrate child friendly attitudes and beliefs (as evidenced by the CCS - CA)			

Case Management Skills	Criteria for Answering Correctly	Met 2 pts	Partially Met, 1 pt	Not Met 0 pts
1. What are the Guiding Principles for Working with Child Survivors	Need to list all guiding principles for full (100%) score. Need to list at least 4 principles for half score (50%) score: 1. Promote the Child's Best Interests 2. Ensure the safety of the child 3. Provide Comfort & Reassurance 4. Maintain Appropriate Confidentiality 5. Involve the Child in Decision-Making 6. Treat Every Child Fairly & Equally 7. Strengthen Children's Resiliencies			
2. What are the mandatory reporting requirements in this setting?	1. Needs to be developed locally.			

3.	What are the limits to confidentiality in child cases?	Need to explain the three main limits for full score:	1. If there are mandatory reporting laws in place 2. The need to protect a child's physical and/or emotional safety 3. Need to obtain parental consent if a young child presents for services (and there is no risk in doing so) 4. If a child is at risk of harming another person (possibly homicidal)	
4.	Explain how informed consent/assent procedures are adapted with children.	Should include these key points for full score:	Based on the child's age and developmental stage Based on the presence/absence of supportive caregivers	
5.	What are the three case actions that promote a child's best interest?	Should include all the following points for full score:	 Protect the child from potential or further emotional, psychological and/or physical harm. Reflect the child's wants and needs. Empower children and families. Examine and balance benefits and potentially harmful consequences. 	
6.	When is informed consent/assent sought during case management?	Need to state both times to get full score:	At the start of case management services For referrals to other services provides This includes obtaining permission for collecting data (IMS) and using it in statistical reports	
7.	Explain the main areas of need that you need to asses for a child survivor	Should name at least four assessment areas for full credit:	Safety and protection Medical care and treatment Psychosocial needs Legal/justice needs	
8.	What are the steps of case management?	Need to name all 7 steps for full credit (4 steps for 50% - partially met)	1. Introduction and engagement 2. Intake and assessment (interview) 3. Case action planning 4. Implementing the case action plan. 5. Follow up and monitoring 6. Case Closure 7. Case Management Service Evaluation	
9.	What are the steps for assessment if a child is expressing feelings of suicide?	Need to name all 4 steps for full credit (2 for 50% - partially met)	 Step 1: Assess current/past suicidal thoughts Step 2: Assess risk: lethality and safety needs Step 3: Address feelings and provide support Step 4: Formulate a safety action plan. 	
10	.What are the main criteria for knowing when to close a case.	Need to name all 3 criteria for full credit (2 steps for 50% - partially met)	 The case plan is complete and satisfactory, and follow-up is finished. There has been no client contact for a specified period (e.g., more than 30 days). The child client and caseworker agree that no further support is needed. 	

TOTAL POINTS			
TOTAL SCORE			
Evaluating Case Management Competency – Instructions for Scoring: 16-20 points: MET: Scores in this range indicate that the staff person has met the core case management requirements and is able to work independently with children and families with ongoing supervision. 8-14 points: PARTIALLY MET: Scores in this range indicate additional training is needed to build knowledge and skills in case management. The staff person should be monitored very closely if working on child sexual abuse cases. A capacity building plan should also be put into place. This may include one-on-one mentoring sessions, additional training opportunities, shadowing fellow staff members, among other capacity building activities. 0-6 Points: NOT MET: Scores in this range indicate that the staff person does not have sufficient knowledge and skills to provide case management to child survivors. A	Final Ev	raluation: _MET _PARTIALI _UNMET	LY Met
capacity building plan should be put into place. This may include one-on-one mentoring sessions, additional training opportunities, shadowing fellow staff members, among other capacity building activities. Following additional training, the CCS-CMA tool should be re-administered.			
OTHER OBSERVATIONS AND COMMENTS			
STAFF FURTHER CAPACITY BUILDING PLAN			
SUPERVISOR SIGNATURE			
STAFF SIGNATURE			