Standards of Practice in Intensive Case Management for Government Assisted Refugees

NATIONAL GAR CASE MANAGEMENT | CLIENT SUPPORT SERVICES

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CODE OF ETHICS

The following sets out the Code of Ethics for National GAR Case Management – Client Support Services staff:

- A CSS staff shall maintain the best interest of the client as the primary obligation
- A CSS staff shall carry out her/his professional duties and obligations with integrity and objectivity
- A CSS staff shall protect the confidentiality of information. He/she will disclose such information only when required or allowed by law to do so or when clients have consented to disclosure
- A CSS staff shall advocate change in the best interest of the client

The CSS staffs provide a wide range of services that encompass direct and indirect practice. Direct practice refers to professional activities on behalf of clients in which goals are reached through personal contact and immediate influence with those seeking services. Indirect practice refers to activities that do not involve immediate or personal contact with the client being served.

THE PURPOSE OF THE STANDARDS FOR INTENSIVE CASE MANAGEMENT

The importance of CSS case management standards and guidelines within CSS

The Canadian immigration system is dedicated to developing and implementing policies, programs and services that facilitate the arrival of people and their integration into Canada in a way that maximizes their contribution to the country. The Department of Immigration, Refugees, and Citizenship Canada (IRCC) also regularly outlines its commitment to maintaining Canada's humanitarian tradition by protecting refugees and people in need of protection. Together with local service provider organizations (SPOs), IRCC implements its settlement and integration work with SPOs guiding and providing direction to the refugee settlement process and the continued development of an accountable refugee settlement system.

Case management services have been provided by SPOs in many refugee receiving cities and communities across Canada for many years. However, because programs are often developed in response to local needs, service components are not always consistent across the country. The single standardized aspect of refugee resettlement in Canada is Canada's Resettlement Assistance Program (RAP). Through RAP, GARs receive income support for up to one year or until they can support themselves, whichever comes first. RAP also provides basic orientation services for GARs during their first four to six weeks upon arrival to Canada. After this, GARs can avail themselves to IRCC-funded settlement programs (available to all Permanent Residents) which help newcomers with various aspects of settling in Canada. The issue is that these settlement services are general and are not enough assistance for most GARs who arrive to Canada with high vulnerabilities including medical and mental health needs. The National Case Management - Client Support Services (CSS) program is the only program available within Canada's settlement and integration sector that provides GARs with the intensive case management support they require over their first 12-24 months in Canada. Given the vulnerable populations it serves, the CSS program is rooted in an empowerment practice theory and strength-based approach. That is, interventions applied by CSS caseworkers help GARs amass the skills and/or resources that will enable them to become independent and navigate life in Canada on their own.

As part of a commitment to delineate settlement service systems for GARs as well as outline their responsibility and accountability, the following standards have been developed to ensure that intensive case management services for GARs are standardized for SPOs who administer the CSS program across Canada. These standards set expectations for intensive GAR case management services so that SPOs across the country are consistent in their service provision and incorporate evidence-based best practices. Standardized service provision will permit development of accurate performance measures and data collection requirements for monitoring the delivery of intensive case management services for GARs across the country.

This document sets out standards for intensive GAR case management, as based on the Client Support Services (CSS) program, the only program in Canada providing GARs with 12-24 months of intensive case management support upon their arrival. The following standards reflect the goals and principles of the CSS program as well as a desired national reform on intensive case management services for GARs. These standards promote, guide, direct, and regulate intensive case management practice within

Canada's CSS program and we welcome they be applied to other settings in which GARs receive intensive settlement support.[1]

[1] These standards do not supersede program partners' internal organizational policies.

1. Introduction to Client Support Services and CSS Intensive Case Management

The CSS Program is a unique Canada-wide program aimed at enhancing the delivery of the Resettlement Assistance Program (RAP). All Government-Assisted Refugees (GARs) are considered vulnerable upon arrival in Canada and can experience significant challenges in their settlement, adjustment and adaptation. The needs GARs face present challenges to clients in their first years of arrival and to the communities receiving this refugee population.

The objective of the CSS program is to provide an intensive and systematic client-centered/case management approach that will provide GARs with a warm, welcoming and safe environment, the essential supports for a more positive settlement experience in Canada and to empower GARs to become independent and self-sufficient after 12-24 months of CSS intensive case management support. The nation-wide initiative has the following three key core program components: intensive case management services, community capacity building and a coordinated approach.

Case Management - "Case management is a collaborative means of helping people who are disadvantaged or devalued in society to discover their strengths and personal power, pursue their own objectives, and begin to confront the systems that oppress them…."

Intensive Case Management: Intensive case management services, as set out by the CSS program, provide GARs with client centered assessments, planning and support to all GAR family members in a flexible, mobile environment, linking them to the supports and services in the community in their first year, post arrival.

The primary function of the CSS Program is the delivery of intensive case management services to GARs within their first year (or so) of arrival in Canada. Case management skills and understanding the day to day roles and functions are essential to the success of the program and, more importantly, to the success of immediate settlement outcomes of GAR clients on the path to long-term integration.

Intensive case management under the CSS program is based on an empowerment-oriented practice; *"a process in which [professionals] engage with "clients" to reduce their feelings of powerlessness, having been more negatively valued in society because of their membership in a stigmatized group"* (Barbara Solomon, 1976. Black Empowerment: Social Work in Oppressed Communities). Under this framework, the CSS program moves forward as a *"collaborative means of helping people who are disadvantaged or devalued in society to discover their strengths and personal power, pursue their own objectives, and begin to confront the systems that oppress them…."* (Dr. Patricia Spindel, CSS Training: January 2011).

What makes the case management "intensive"?

- Frequent one-on-one interaction between the CSS staff and the clients throughout the duration of the program
- Administration of the Needs Assessment Matrix at regular intervals
- Case management activities are provided in the community and in clients' natural environment and the focus is on building natural community connections, ex.: landlords, employers, teachers.

The core activities of intensive case management include the following:

- Regular assessments to distinguish different level of interventions through the Needs Assessment Matrix
- Short and long term goal setting
- Arranging and accompaniment to appointments (e.g. medical, school, legal, etc.)
- Conducting home and community visits
- Providing interpretation and translation
- Life skills support (e.g. showing GARs how to use public transit, how to use an ATM, appliances, reading and understanding mail)
- Community orientation and general orientation to Canada
- Pre-employment and employment preparation
- Community and crisis intervention

Community Capacity Building: Both within the IRCC family of settlement services and the broader community, capacity building aims to strengthen the receiving community's capacity to provide culturally and linguistically appropriate supports and services that are responsive to newly arriving GAR families, especially those with complex/high needs.

- Wrap around services: During the wraparound process, a team of individuals who are relevant to the well-being of the client (e.g., family members, service providers, other natural supports, agency representatives, etc.) collaboratively develop an individualized plan of care, implement this plan, and evaluate its success over time.
- **It is mandatory that CSS staff document Community Capacity Building activities in the ETO database**

National Coordination: The YMCA of Greater Toronto, coordinates the CSS program nation-wide, providing national database development and information sharing, in-depth tracking and reporting, and support for innovation, quality improvement and program evaluation.

Specifically, the CSS Program activities reflect the following objectives:

a) To provide the core elements of a holistic, intensive case management approach with GARs in a flexible and mobile fashion to where clients are located

b) To improve GARs access to community services in a manner that does not overlap with settlement funded services/programs

c) To engage community agencies in providing support services to GARs

d) To monitor and evaluate program activities against specific program goals and refine these activities/models if needed and

e) To document and monitor the provision of long-term settlement support to GARs including data collection, evaluation of activities and quality assurance practices.

Background of the CSS Program

2005, Case Management Pilot Project, delivered by: YMCA of Greater Toronto

2007, Client Support Services Project (6 Ontario RAP Agencies), Provincial Coordinator: YMCA of Greater Toronto

2009, Project Evaluation: Kappel – Ramji Consulting Group

- Quantitative & qualitative data collection methods:
  - Data analysis
  - Interviews with GAR clients, CSS staff, community stakeholders (total = 240 individuals)
- CSS Evaluation Questions:
  - How well is CSS model working?
  - How effective is province-wide coordination?
  - Effectiveness and efficiency of service delivery
  - Impact of CSS on GAR resettlement
- 27 recommendations made, including transition of CSS to program status, effective April 1, 2010

2010, Client Support Services becomes a provincial Program

2014, Impact Evaluation

- Quantitative & qualitative data collection methods:
  - Data analysis (CSS Database, Client Demographic/Intake
  - Interviews and focus groups with GAR clients, CSS staff, community stakeholders (total = 151 individuals)
  - Surveys distributed to GARs, CSS staff, community stakeholders (total = 254 respondents)
- CSS Evaluation Questions:
  - Do GARs coming through the CSS program actively participate in their communities and feel welcomed and accepted in them?
  - Have GARs been able to effectively use health and human services to meet their long-term integration needs?
  - Is there evidence for long-term integration outcomes for GARs passing through the CSS program?
- 30 recommendations made including that community capacity building should continue and focus on emerging areas of settlement and integration, IRCC should fund youth case workers at

each CSS site, and CSS should increase efforts to support client knowledge in all services related to children.

2017, Client Support Services becomes "National GAR Case Management – Client Support Services"

CSS Clients

A refugee is "someone who is unable or unwilling to return to their country of origin owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group, or political opinion" (1951 Refugee Convention). There are various categories of refugees, some of which are indicated in the following table:

• Canadian Resettlement Programs				
Resettlement type	**Government-Assisted Refugee Program (GAR)**	**Joint Assistance Sponsorship Program (JAS)**	**Private Sponsorship of Refugees Program (PSR)**	**Blended Visa Office-Referred Program (BVOR)**
Referred to IRCC by:	UNHCR	UNHCR	Private Sponsors[2]	UNHCR
Funded by:	IRCC, through the Resettlement Assistance Program (1 year)	IRCC, through the Resettlement Assistance Program (1 year)	Private sponsors (1 year)	IRCC and private sponsor, each of which is responsible for 6 months of income support. Private sponsor covers start-up costs.
Settlement support by:	Resettlement Assistance Program	Private sponsors	Private sponsors	Private sponsors

Source: http://www.lop.parl.gc.ca/content/lop/ResearchPublications/2015-11-e.html
Table prepared by the author, based on Nadine Nasir, *Overview of the Private Sponsorship of Refugees (PSR) Program*, Webinar, Refugee Sponsorship Training Program, 29 January 2015.

The CSS program explicitly serves Government Assisted Refugees (GARs) as clients. GARs receive services in a different manner than other resettled refugees. GARs are referred by UNHCR, resettled to Canada by the Canadian government, and are identified as Convention Refugees Abroad and Humanitarian Protected Persons Abroad classes. Government Assisted Refugees selected for resettlement to Canada are assessed for vulnerability by UNHCR while still abroad on the following criterion:

- Legal and physical protection needs
- Survivors of torture and/or violence
- Medical needs
- Women and girls at risk
- Family reunification
- Children and adolescents at risk

[2] Refugees referred by Groups of Five and community sponsors must have documentation showing that the UNHCR or a foreign government has determined that they are refugees.

- Lack of foreseeable alternative durable solutions

Based on the enactment of the Immigration and Refugee Protection Act (IRPA) in 2002, GARs are selected based on their need for protection rather than their ability to resettle. The result of this action is a higher number of GARs, and thus CSS clients, arrive in Canada with significant high and complex needs, which can include, but are not limited to:

- Diverse previous living conditions: rural, urban or refugee camps across the world
- Experiences with trauma, incarceration, torture or witnessed atrocities
- Numerous health, including serious and acute conditions, and mental health needs (i.e. post-traumatic stress, depression, etc.)
- Low literacy skills and lack of formal education
- Low English and French language skills
- Diverse family composition, including large and extended families and single parents with a larger number of children

The CSS program provides 12-24 months of client-centered intensive case management services to CSS clients and their families. The duration of service provision is dependent on the need of the client and determined by the CSS staff with the support of the Needs Assessment Matrix. Exceptions may be made for high need cases to continue the delivery of CSS services up to 24 months.

Relationship with Clients

The foundation of CSS is that the program works from an empowerment perspective, the belief that clients have the right and capacity to determine and achieve their goals. CSS staffs and GAR clients participate together in setting and evaluating the progress.

A central part of the CSS staffs role within the CSS program, involves interacting with clients in a respectful and professional manner. It is important to know what the boundaries of the job entail around communicating and interacting with clients; the professional (not the client) is always charged with the responsibility for establishing and maintaining boundaries.

Clearly informing CSS clients of the goal of the CSS program and the role of the CSS staff (outlining responsibilities including constraints and limitations) is a required first step in setting client expectations for their time in CSS.

- **All families served in CSS should have an assigned primary CSS staff**
- **Introducing the Client Charter at the onset of service is a best practice**

2. Standards:

Standard 1: Code of Ethics

<u>CSS staff:</u>

- **CSS staff treat clients in a caring manner respecting their self-determination and valuing their strengths**
- **CSS staff are aware of clients' values and skills as well as the needs**
- **CSS staff are reminded to maintain a professional relationship with their clients**
- **CSS staff establish and maintain clear and appropriate boundaries in professional relationships**
- **CSS staff should not engage in physical contact with their clients**
- **CSS staff do not solicit or use information from clients to acquire advantage**
- **CSS staff are never to use confidential information to the disadvantage of clients or to their own personal advantage**
- **CSS staff do not act as representatives for clients under powers of attorney or representation agreements.**

Standard 2: Boundaries

A central part of the role of intensive case manager involves interacting with clients in a respectful and professional manner. It is important to know what the boundaries of the job entail around communicating and interacting with clients. The intensive case manager, i.e. the professional (not the client) is always charged with the responsibility for establishing and maintaining boundaries. All standards related to *Boundaries* are subject to the intensive case manager's own organizational policies and guidelines.

CSS staff inform clients that the interaction will change over time, i.e. as clients become more self-sufficient, the role of the CSS staff will become less intensive.
If a CSS staff begins to feel that a CSS client of theirs requires too many emotional resources, they should talk with their supervisor about this.

CSS clients may sometimes ask CSS staffs to help their extended family members, friends or relatives. CSS staffs are reminded that their role is to work with their client *only*, not extended family members.

2.1 Encounters in the community

Encountering clients in the community while not working will inevitably happen. If a CSS staff encounters a CSS client in the community/in their personal life during off-work hours, and the client insists to talk about their 'case', CSS staff should tell them that is not a topic to be discussed at that time. Explain to the client you are both a CSS staff and a member of the community, but that you cannot be both at the same time.

- **If a CSS staff encounters a client in the community who has requested help, best practises for the CSS staff is to follow up with the direct Supervisor/manager once back at the office**
- **CSS staff does not take responsibility for GARs actions**

2.2 Social media

Social media can be a useful communication tool that connects members and staff of the CSS program with other staff, volunteers, and communities at large. As social media evolves and becomes more embedded within the workplace, it is necessary that employees are proactive in their responsibilities on such platforms.

The following provides a set of guidelines for professional social media usage to assist the CSS staff with successfully and responsibly setting boundaries with clients via social media. These guidelines are subject to staff's own organization policies and guidelines on social media use.

- **CSS staff should not** disclose confidential information related to past, present or future employees, volunteers, members, clients, guests, funders, or other persons conducting business with the CSS program on your social media platforms.

- **CSS staff should** protect their social networks, and keep their personal information private. It is recommended that they adjust the privacy settings on their social media accounts to limit access to their personal information by clients or anyone they do not know.

- **CSS staff should use their professional judgment, seek information from other sectors, review best practice guidelines and risk management strategies, and engage in on-going dialogue with their colleagues and supervisors. Refer to your own organization's policies and guidelines on social media use for further information.**

2.3. Romantic Relationships

Romantic relationships with current CSS clients are inappropriate and not permitted.

- **CSS staff are prohibited from engaging in sexual activities or sexual contact with CSS clients, clients' relatives, or other individuals with whom clients maintain a close personal relationship**
- **CSS staff should not provide CSS services to individuals with whom they have had a prior sexual relationship**.
  Providing services to a former sexual partner has the potential to be harmful to the individual and is likely to make it difficult for the CSS staff and individual to maintain appropriate professional boundaries.[3] **(Please refer to your local organization's policies for more details)**

[3] NASW, 2000, Standard 1.09 [d]

2.4 Home Visits

Prior to conducting any home visits, CSS staff are to compile a list of all planned visits in their scheduled order. These visits should be authorized by their direct Supervisor.

Safe practice recommends that home visits be scheduled in the morning. There may be times when an exception is made (authorized by Management) and the visit is scheduled for the afternoon/ evening.

If, at the end of the business day, a CSS staff member out on home visit fails to make contact, Management will:

1. Call the staff persons' personal cell/work cell and/or their home.
2. Contact the third party/client where the staff was scheduled to visit.

If unable to reach the staff person by the end of the day, the police must be contacted and advised that the CSS staff person has not returned to the office/home and all attempts to contact have been unsuccessful.

Conducting a pre-visit risk assessment of a home is essential in identifying potential risks and vulnerabilities. When an address is identified as unsafe, home visits are to be waived.

2.5. Emergency Situations and After Hours

CSS staff are instructed to turn off their phones after working hours, informing their clients to call 911 in the event of an emergency. CSS staffs educate clients what qualifies as a 911 emergency.

In the event that a CSS client is experiencing a crisis after hours that is not a 911 emergency, emergency crisis lines and mobile crisis support units can offer assistance. It is helpful for CSS staffs to inform CSS clients in advance that these services are available (and where) in their community for support.

Some CSS sites allow staff to work after hours in the event of a client emergency, however this is at the choosing of the manager. The CSS staff is to seek Management approval when requesting to work after-hours. Staff safety should always be ensured. Please refer to your organizational policies which supersede these Standards.

- **Inform clients that the CSS staff will be available to answer the phone or respond to texts or social media messages only during the working hours, and that any form of communication outside of that specific timelines, will not be answered.** Clients may call or text in their first language. Emergencies should be directed to appropriate services, and if the client leaves a message then, they should expect to receive a call back within 24-48 hours.
- **All CSS staff should have a work cell phone with data plan**

Standard 3: Confidentiality, Privacy and Information Sharing

Confidentiality ensures the client understands that although the information they share with a CSS program staff member is private and confidential, there are certain instances where the staff member

might have a duty to disclose. **The client signs a confidentiality form to demonstrate they understand while the staff member signs off on it to demonstrate they have explained it.**

Before collecting any information from a client, CSS staff must make sure to inform the client of the conditions under which confidentiality cannot be guaranteed:

- If the client discloses information that suggests they are at risk of harming themselves or someone else
- If the client discloses information concerning abuse or neglect of a child (check the legal age in your province).
- If the client signs a consent giving permission for you to share information
- If the client's file is subpoenaed in a court of law

- **CSS clients must sign a CSS Client Charter and the signed copy be placed in the client file.** The CSS Client Charter is a document that clearly outlines for all newly arrived Government-Assisted Refugee (GAR) clients the types of services that will be delivered in the program, their rights and responsibilities as CSS service users, as well as what is expected of CSS staff providing case management services.

- **CSS staff are advised to set boundaries and limits with clients who regularly disclose too much information**. Inform your direct Supervisor if the case continues.

- **Interpreters must sign the same confidential forms that CSS staff sign**. CSS staffs should review the importance of confidentiality with interpreters on a regular basis as interpreters are often from the same socio-cultural group.

When a client does not want an interpreter from the same social or cultural group and there is such an interpreter available to meet this request, the CSS staff should do their best to honour this ask.

It is recommended that CSS staffs follow these minimum requirements regarding consent and youth clients:

- **All youth clients over 18 years old (check the legal age in your province) sign consent and confidentiality forms.** A copy of these forms should be in the youth client's file and copies should be given to the youth client.
- **Files for youth clients under 18 years old should contain copies of the 'Case' or 'Family' consent and confidentiality forms** (which were signed by the guardian).

Standard 4:

Protection, Privacy and Security of electronic records

A Site who is implementing an electronic record-keeping system, falls under the responsibility of the organization supporting the program.

- **A Site that maintains electronic records, will have policies in place for electronic data management**

- **The CSS staff must ensure that all electronic data management is in compliance with the relevant privacy legislation**

- **The CSS staff should consider the following items:**
  - How the information collected from clients may be used or disclosed
  - How long the file will be maintained and how they will be disposed of at the end of that period
  - Security systems that are in place for the information maintained in the electronic record
  - Access to client records in case of client emergency
  - The data back-up system
  - How access to electronic records will be logged in and monitored
  - How any breach of privacy will be manage

Standard 5: Constraints and Limitations

CSS staff are not lawyers or doctors, and so, cannot directly answer clients' legal or medical questions. They are also not government workers and cannot make, influence, or change the decisions of government or their offices.

CSS staff are not permitted to participate in any of the following:

- **Provide medical or legal interpretation (unless in urgent cases with no foreseeable alternatives)**
- **Have access to clients' medical information, including medical intake and assessment, unless essential to service provision**
- **Provide any mental health interventions as done by medical professionals**

CSS staff are to rely on referrals to medical and health professionals, lawyers and legal teams, and government offices and representatives to address any client needs pertaining to the above. Qualified and certified medical and legal interpreters must be sourced in the case of interpretation provided in health settings and legal realms.

Standard 6: Qualifications and Knowledge

Preferred Qualifications

Education:

- The minimum level of education required for this position is a Community College Diploma, preferably in Social Services, Counselling, Children and Youth, Psychology, or related fields. University Degree in Social Work is preferred and/or 1-2 years of relevant experience.

Experience:

- Minimum of 1-2 years of practical experience working directly with refugee families, including adults, children youth, & seniors is preferred;
- Minimum one year of experience in a case management role serving a vulnerable population, specifically people who have experienced abuse, torture, war and/or persecution;
- Knowledge and commitment to the issues faced by resettled refugees; demonstrated understanding of Canada's Resettlement Assistance Program is preferred;
- Proven ability to outreach to newcomer communities and service providers as needed and proven ability to work effectively with people from diverse cultural backgrounds;
- Familiarity with community programs, services, and resources available in _____; and
- Ability to develop and maintain effective relationships with key community partners and stakeholders.
- International work experience is a strong asset

The CSS staff will have the appropriate skills to meet standard of practice requirements:

Cognitive Competencies:

- Ability to read and communicate straightforward and routine information to clients, colleagues, and community partners
- Ability to read and understand client documents
- Ability to prepare standard reports, forms, and program statistics
- Fluency in English is required (verbal and written), while advanced knowledge of a second language is an asset

Social Competencies:

- Ability to demonstrate commitment to respond to clients' requests and needs in a timely manner
- Presentation skills, interpersonal skills, mediation skills, and cross-cultural sensitivity
- Communication, organization, time management and coordination skills
- Ability to work effectively as part of a team
- Proven ability to multitask and thrive in a fast paced environment and high stress situations
- Ability to work in partnerships and collaborative relationships with different stakeholders
- Ability to deal with confidential material and matters
- Competent in trauma and violence-informed care
- Competent in adult learning principles

Other Competencies

- Computer skills using the following programs: Microsoft Word, PowerPoint, and Outlook; program databases; social media apps
- A valid driver's license and access to a vehicle is preferred, but not required
- Vulnerable Sector Screening (VSS) Police Check will be required upon hiring
- ASIST Certification
- First Aid Certification

Duties & Responsibilities:

Client Services:

- Conduct detailed needs assessments for Government Assisted Refugees (GARs), identify GARs' short and long-term settlement goals, and assess and respond to initial needs of GARs
- Provide interpretation and accompany GARs to facilitate access to services
- Conduct home visits (or perform in-person visits at the office) as required to follow-up and re-assess client needs
- Organize & facilitate workshops to orient GARs to their new community, Canadian culture & social norms
- Refer clients to community and settlement agencies, professional services, social services and other required services
- Provide telephone support, and crisis intervention as needed
- Manage and maintain up-to-date client files, input client data and information into program database, complete government documents and forms, provide referrals, write case notes, keep documentation of all client cases.
- Evaluate client progress every 3 months
- Develop outreach initiatives, educational materials and sustainable strategies that are responsive to the complex needs of GAR clients
- Develop and cultivate relations and partnerships with community (community capacity capacity); participate in activities that educate the community around the issues and barriers faced by GARs
- Advocate and/or organize case conferences on behalf of clients for services and resources in the community
- Participate in case management meetings with internal staff and external service providers

Other Duties:

- Participate actively in all mandated training, staff meetings and workshops
- Maintain and submit accurate tracking documents and monthly reporting updates to the supervisor
- Use data management system, data entry
- Ensure appropriate and confidential handling of all client information and files
- Operate in accordance with the policies, guidelines, and protocols of the program and partner organizations
- Work from a lens of continual improvement of client service, including evaluation of the program on an on-going basis and making recommendations for service delivery improvements
- Follow work safety procedures
- Participate in annual conferences with internal/external partners
- Other duties as assigned

Standard 7: Needs Assessment

- **The standardization of the Needs Assessment Matrix (the fact that it is used across all CSS sites) ensures that all CSS program Sites are consistently collecting relevant information to support in managing the client/case and measuring the level of need and service intervention.**

Conducting a needs assessment and determining the level of need of a GAR client is an important step in the provision of case management services to GARs. Through this process, CSS staffs are able to identify the clients' immediate needs and facilitate service navigation in their respective community. Furthermore, by determining the level of need of a client, CSS staffs are able to discern the intensity of supports to be provided to clients, ensuring that clients with the highest needs are prioritized accordingly.

The Needs Assessment Matrix is a survey intended to support CSS staffs in their assessment of the level of need of a client and to provide backing to their decisions on how to serve their clients. The survey is organized into 16 different factors of settlement selected based on what determines the level of need of a client. These factors of settlement are:

1. Health
2. Housing
3. Safety & Security
4. Language
5. Immigration & Government Services
6. Ability to follow instructions
7. Transportation
8. Financial Matters
9. Education & Training
10. Employment
11. Social Support & Community Connections
12. Access to Services & Community Mapping
13. Childcare
14. Education of school-age children
15. Extra-curricular activities for school-age children
16. Parenting

Each factor of settlement includes questions that determine the client's capacity to address their own needs, meaning that instead of determining whether the need is met or not, the questions determine whether the client is on the path towards self-sufficiency. In addition, the survey demonstrates the changing level of need of a client over time, of the changing needs of the client and of the services they require beyond the CSS program.

- **Clients in the CSS program should receive the Needs Assessment Matrix every 4 months for a period of 12 - 24 months**. Depending on the level of need of the client at the initial assessment point, the survey may be administered less or more within the essential points of service, depending on how long the individual or family is a member of the CSS program.

For example, should the client be of low needs, they may only receive the survey once at the A1, and only receive the A3 at the 8th month mark. Alternatively, the client could have high needs throughout the 12 months of the CSS program and be extended to stay with the program for 24 months, thereby receiving an additional survey after the A4 (A5 assessment at the 16th month).

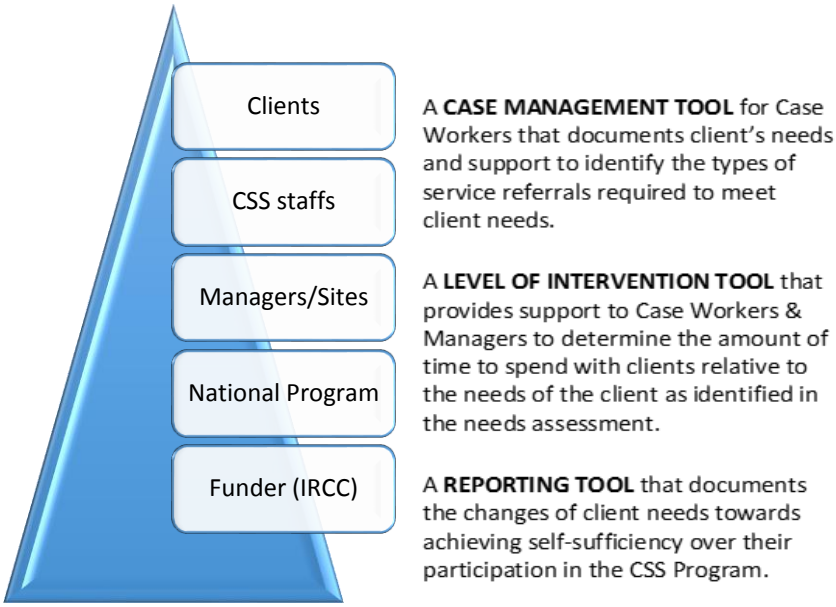
CSS Needs Assessment Matrix- Essential Points of Service

A1 & D			A2				A3				A4				A5
Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12	Month 13	Month 14	Month 15	Month 16

Legend:

D - Client Intake/Demographics
A1 - First Assessment (Initial Assessment)
A2 - Re-assessment at 4 months
A3 - Re-assessment at 8 months
A4 - Re-assessment at 12 months
A5 - Re-assessment at 16 months

There are multiple beneficiaries of the Needs Assessment Matrix and the tool was designed to serve multiple purposes as outlined below:



Standard 8: Record Keeping

Documentation is an essential component of professional case management practice. Documentation provides a record of CSS staff planning and client progress. CSS staffs of the CSS program are required to make and keep records of all clients and are accountable for ensuring that the file documentation is current, accurate, contains relevant information and is managed in a way that protects client privacy.

- Store files in a locked cabinet that staff share (not in staff desks)
- Keep the key to unlock the cabinet in a secure place
- Store files in an orderly manner

Documenting:

It is recommended that within a 'family case' file, CSS staff use separate documents, forms, and case notes for individuals of that family when there is a direct intervention relating to that individual.

The benefits of this method of documenting individuals within family cases include:

- allows for better tracking of individual activities in the database systems (i.e. ETO and iCare)
- provides an accurate record of individuals assessments, needs, goals, correspondence, etc., in case a file needs to be transferred to another CSS staff
- provides a separate record should an individual client requests to see their file (because they only have access to information provided by them)

Note that 'family case' files may continue to include general family information (i.e. family housing needs, case notes, etc.) using forms and documents such as Case Intake and Needs Assessment, Settlement/Empowerment Plan, Exit Interview Questionnaire Form, etc.

Case notes may also be typed directly into the Efforts to Outcomes (ETO) database, and a "Case Note Summary" is easily obtained and printed from the ETO "Review Family Efforts Report". Ensure to follow the local site requirements regarding how often to print off updates to the client's file. **Otherwise, it is recommended to print off client file updates once a week so that the files remain current.** This ensures that the files are up-to-date and also that should a file be required but cannot be accessed electronically, the hard copy client file be complete and copies of all case notes are included.

- **Documentation is necessary if there is substantial information that is relevant to being in the client file. Case note documentation is necessary for any formal meetings and/or assessments (i.e. intake/needs assessment, quarterly check-ins, home visits) and should be completed between one to five business days.**
- For documenting 1:1 sessions that have substantial information, a concise summary of the session's content should be recorded. This includes reason for contact, objective observations of how a client appeared, issues discussed, any goals or contracts that were agreed to and the required follow-up, and any behaviors that were exhibited.
- If appropriate, include a verbatim comment from the client; "client stated that…"
- Make probabilistic statements versus absolute statements, i.e. "the client *appeared* upset," versus "the client *was* upset."
- Avoid generalizations and diagnostics, i.e. "client is depressed." Only specific professionals are qualified to make this kind of diagnosis.
- Do not editorialize and be judgmental, i.e. "the client is not making the correct decision" or "there is no way the client will get a job dressed like this".
- Be consistent with style. Documentation should be written in the third person format, i.e. "CSS staff stated…." "this writer stated….".

- **CSS staff ensure that all correspondence (emails, faxes, telephone calls, etc.) are noted in the client file either in a case note or a separate correspondence sheet.** It is recommended that this information be documented, including who was contacted, how and when they were contacted, the purpose of contact, and any relevant content of that correspondence. This ensures all CSS staffs have an accurate record of their daily work should any questions arise regarding their communication efforts with clients and other partners.
- When documenting content of correspondence in a case note, the same guidelines of this document apply. For example, documentation is necessary if there is substantial information that is relevant to being in the client file
- If the CSS staff chooses to print off email correspondence, the same guidelines of this document apply. For example, prior to printing, CSS staffs ensure to delete from the email, or email trail, any information that is not necessary to be in the file. CSS staffs ensure to follow the local site organizations guidelines regarding printing of emails and how clients are named in those emails.
- Any correspondence (letter, email, fax, etc) written to any external partners in which a CSS staff is writing on behalf of a client, must be signed and dated by the CSS staff's Supervisor and a copy kept in the client file.

- **"As per Citizenship and Immigration Canada's national resettlement guidelines, CSS staff ensure that they do not include medical information in the CSS client file".** In the instance that a CSS staff receives a client diagnosis (i.e. from the NAT, RAP referral form, or any other immigration medical form), the CSS staff ensures to transfer the medical requirements to the case notes in relation to that diagnosis, then the diagnosis must be stricken from the record (blacked out and photocopied).
- When writing about sensitive information in case notes, it should be done so in general terms. For example, if a client discloses information regarding HIV status or another communicable disease, it is recommended that this be documented in general terms i.e. "client indicated that they are the carrier of a communicable disease."
- Similarly, sensitive information regarding a criminal record should be documented in general terms i.e. "client indicated a criminal record." Do not document a criminal record wherein the client was considered a Young Offender and is protected by the Young Offender Act.
- **CSS staff must only record client's personal information that is necessary to carry out the** program.
- **CSS staff ensure to document in the case notes when another party is consulted regarding a client file. This applies to other staff in the program, the CSS staffs Supervisor, other internal staff, external agency staff, etc.**
- Incident reports should be submitted by the end of the shift

CSS staff ensure to be consistent in following their local site organization's guidelines regarding how to name third parties in the file.

- **CSS staff maintain a thorough understanding of the organization's policies with regards to retention, storage and security of records**

- **CSS staff protects the confidentiality and security of paper records, electronic records and other communications**

- **CSS staff makes sure that each client record is stored in a secure location for at least of seven years from the date of last entry**

Standard 9: Workload Sustainability

Definitions:

Caseload: the number of cases (singles or families) assigned to an individual CSS staff in a given time period. Caseload reflects a ratio of cases (or clients) measured for an individual CSS staff.

Workload: The amount of work required to successfully manage assigned cases. Workload reflects the average time it takes to a CSS staff to:

- Do the work required for each assigned case and,
- Complete other non-casework responsibilities.

Caseload and Workload in CSS

The following outlines the average CSS caseload per CSS staff and per client's level of need:

Average caseload/CSS staff by level of GAR needs per active clients 18+ years old							
	Average Caseload (for 6 Ontario sites) - # Cases	Average Caseload (for 6 Ontario sites) - # clients	# Very High Needs	# High Needs	# Moderate Needs	# Moderate to Low Needs	# Low Needs
September 2018	20	61	10	15	7	2	0
November 2018	21	56	5	10	7	9	6
January 2019	22	58	6	9	6	9	5
Average	**21**	**58**	**7**	**11**	**7**	**7**	**4**

This table is based on the average caseloads of 6 Ontario sites (Ottawa, Hamilton, Kitchener, Toronto, London, and Windsor) over a three month time period. The column with the average caseload is based on all clients being served by a CSS staff, whereas the columns with the need levels are based on clients over 18, as they are the only ones who receive quarterly needs assessments. Therefore, caseloads with participants under 18 years of age who have high needs or very high needs are not represented in this table.

Other factors that can impact the average, include Sites where non-CSS staffs working under CSS have a caseload, Sites where CSS staff work only with youth clients, and instances where new staff are hired and are building their caseloads. As these staff will have a smaller caseload than other CSS staffs, the results may vary.

Regardless, where possible, the average ratio of CSS staff to clients should be 1:55-60 clients. Additionally, there should be an even distribution of need levels within these caseloads.

Maintaining a standard caseload for each CSS staff is important for the following reasons:

- Large caseloads and high workloads can make it difficult for CSS staff to serve clients effectively; and
- With smaller caseloads, CSS staff can better engage clients, deliver quality services and achieve positive GAR outcomes

Because CSS staff are responsible for anywhere between 50-60 clients at any one time, CSS staff acknowledge that not every GAR family will require the same intensity of support. It is also the case that with the periodic admission of GARs into RAP, and the tendency for large numbers of GAR families to arrive at any one time, the intensity of work for a case manager can fluctuate dramatically depending on incoming GAR arrivals.

Efforts Received by High Needs Clients vs. Low Needs Clients

Through the database, case management activities are documented under the following topics:

- Becoming a Canadian citizenship
- Canadian law and justice
- Education
- Employment
- Health
- Housing
- Language skills
- Life skills
- Money and finances
- Overview of Canada
- Social support and community connections

Once a topic is selected, there are a range of activities to select from to document the specific manner that the CSS staff assisted the client(s). In instances, where clients need assistance or services outside of the scope of the CSS staff and the Site, they are referred to external third party with the resources and capacity to help. Referrals are also documented in ETO.

The following outlines the average number of case management activities and referrals per need level:

Average number of case management activities (Case Management Activities [CMAs]) and referrals per needs level

	# Very High Needs	# High Needs	# Moderate Needs	# Moderate to Low Needs	# Low Needs
Average # of CMAs	**22**	**15**	**19**	**13**	**10**
Time Spent (Mins)	1034	1120	1179	952	615
Time Spent (Hours)	17	19	20	16	10
Average # of referrals	**10**	**10**	**11**	**5**	**4**

Case management includes the following processes: intake, assessment of needs, service planning, service plan implementation, service coordination, monitoring and follow-up. At most CSS locations, case management will also include follow-up assessments, case conferencing, crisis intervention, and case closure. Case management activities for CSS case worker staff are diverse. Case management activities are any activity undertaken by CSS staff together with or for CSS clients. Examples may include: scheduling appointments, accompaniments, providing referrals, providing life skills support, helping fill out forms, etc.

Another way to define vulnerability is the frequency of services per level of need.

Standard 10: Professional Development

- **CSS staff demonstrate their commitment to ongoing professional development provided by CSS Coordination team and engaging in any continuing education**
- **Staff maintain current knowledge of CSS policies, guidelines, programs and issues related to the community and services in their area of practice**

The provision of professional development training for CSS staff and staff is imperative in enhancing their knowledge, skills and confidence in providing intensive case management services to GAR clients. In order to ensure that CSS program staff receive appropriate training and skills required to carry out their roles as CSS staffs, the following trainings are undertaken by CSS staff throughout the fiscal year:

Mandatory New Staff Training: New CSS staff receive training from the CSS National Coordinator which includes:

- **CSS Orientation and Intensive Case Management Training**
- **CSS National Database Training**
- **CSS Moodle Orientation**
    - Within Moodle, CSS-specific webinars are offered, most of which provide learnings on topics related to administering CSS intensive case management. Moodle also provides a repository of webinars offered by external organizations on topics related to supporting vulnerable refugees in Canada.
- **CSS Safety and Security Training**

Local Site Training: Once per year, all CSS program staff receive a one-day intensive professional development training from the CSS National Coordinator. This training is provided in-person by an external organization and is mandatory for all staff to attend.

Annual Meeting: The CSS Annual Meeting, held once per year in Toronto, provides CSS staff with the opportunity to enhance their knowledge/skills through the provision of professional development training sessions, engage in group discussion to identify common issues and challenges and to identify strategies to resolve issues, and to acknowledge the positive impact of CSS CSS staffs and intensive case management to the area of refugee resettlement in Canada.

Standard 11: Self-Care

- **Self-care should be viewed as a team effort by all CSS staff and managers.**

CSS management staff should ensure self-care for their teams. Ways of ensuring that staff have are not overwhelmed, overworked, and burning out include the following:

- Develop care plan for staff
- Regularly assess staff workloads (and reduce workload if necessary)
- Nurture a work culture of collaboration, cooperation, negotiation – all items are open for discussion and revision

- Train staff on critical interventions (for example, how to work with families involved with Children's Aid Society) to equip staff with the competencies and confidence to handle difficult client situations
- Train staff on the difference between emergencies and urgencies and what qualifies as a crisis and requires immediate attention and what does not
- Hold more time and space for debriefing
- Approve sick leave

Conclusion: Relationship between CSS Service Standards and GAR Outcomes

This document has described intensive case management service standards for GARs in the CSS program and outlines the various service standards that, in combination and with compliance of, lead to more independent and self-sufficient GARs in Canada. Compliance of the various service standards outlined here also ensures GAR intensive case management services offered by CSS are comprehensive, nationally coordinated and based on CSS-specific case management best practices. As such, the CSS intensive case management standards outlined in this document reflect intensive case management practices applied throughout the CSS program in Canada *only* and not all GAR-serving agencies.

This document represents the first step in the provision of a clear program direction for intensive case management services for GARs in Canada, however, as all service providers may not be able to meet all outlined standards immediately, we recognize that significant funding must be invested in the enhancement and/or initial implementation of intensive case management services to RAP SPOs. This will ensure that all RAP SPOs will be able to meet GAR intensive case management standards.

With national GAR intensive case management standards in place, the sector has the potential to implement an accountability process to monitor exactly how intensive case management services result in GARs integrating wholly into their new communities in Canada. In the future, we may also be able to answer the following questions:

- ***Are GAR services being delivered across the country in a manner in which outcomes are consistent with IRCC defined outcome "success" and with evidence-based case management best practices?***
- ***Are clients satisfied with the service they are receiving and is the service helping them to achieve their personal definitions of independence, self-sufficiency and success?***

The answers to these and other questions will inform the continued improvement and evaluation of CSS intensive case management services within Canada and the program's invaluable contribution to the refugee settlement field.

Glossary

Intensive case management	The consistent one-on-one interaction between the CSS staff and the clients throughout the duration of the program.
Intensive Case Manager	Alternative titles include intensive case worker, case worker, settlement staff, and case manager.
Accountability	Client trust and effective coordination rest on the delivery of promised services. For case management to work, clients, case managers, and institutions must be clear about their roles and responsibilities; tasks and associated time lines must be written down; and ambiguity must be replaced by explicit agreements. When accountability is not clear, case management systems break down.

Best practice	A best practice is a method or technique that has consistently shown results superior to those achieved with other means, and that is used as a standard.
Case note	A case note is the term applied to a chronological record of interactions, observations and actions relating to a particular client
Boundaries	"The ability to know where you end and another person begins. When we talk about needing space, setting limits, determining acceptable behavior, or creating a sense of autonomy, we are really talking about boundaries" (University of California, 2007).
Confidentiality	Confidentiality is the obligation to not willingly disclose information that has been received in confidence
Document	A document can refer to a case note, a form or another type of document contained within a client file.
Documentation	Documentation is the way service providers record their work, means by which cases are managed, and manner in which services are evaluated, assessed and often reimbursed (Social Work Dictionary, Barker, 2003)
File	A file is the collection of documents pertaining to a particular client or family case
Legal record	A client file is a legal record that is made available upon request from a client or legal services
Objectivity	Objectivity is the capability of a CSS staff to assess and work with a client in a professional manner, leaving judgments and opinion out of the relationship.
Outcome	Outcomes refer to the results of the intensive case management work
Advocate	Empowering clients; Providing clients with necessary tools and resources that help them to navigate the services in the community by their own; Encouraging and involving clients to participate in various workshops and training to advocate themselves and access services; Educating external service providers on GAR needs and strengths to better accommodate GARs.
Conflict of Interest	Refers to a situation where a CSS staff has a relationship that could be seen as improperly influencing their professional judgement; may exist where the CSS staffs benefit from the situation.
Consent	Consent refers to the release of information of a client

Informed Consent	Permission given by a client to the CSS staff based on the understanding of the facts, risks and alternatives.
Professional Relationship	A relationship with the CSS staff that has expertise, knowledge and skills
Community Capacity Building	The process of removing barriers, increasing access to services, and influencing positive change within a community for GARs.
Empowerment-oriented Practice	Supporting GARs to "[discover] their strengths and personal power, pursue their own objectives, and begin to confront the systems that oppress them…" (Spindel, 2011) as opposed to only focusing on clients' needs.
Trauma and Violence-Informed Care	Efforts that are undergone by staff to ensure that all activities and spaces for activities allow for safety and agency for GARs, understanding the potentiality that they can be experiencing effects of trauma.
Crisis (client related)	A disruption or breakdown in a person's or family's normal or usual pattern of functioning. A crisis cannot be resolved by a person's customary problem-solving resources/skills. Each crisis situation is unique and will require a flexible approach to the client and situation.
Emergency situation	An emergency is a situation that poses an immediate risk to health, life, property, or environment. Most emergencies require urgent intervention to prevent a worsening of the situation, although in some situations, mitigation may not be possible and agencies may only be able to offer palliative care for the aftermath.
Circle of Care	A philosophy of care with defined planning process used to build constructive relationships and support networks for GAR families. The "circle" label refers to the fact that services are intended to wrap around the GAR in a way that supports them in all aspects of their life. This philosophy incorporates the natural support systems of clients, along with various agency personnel and community representatives, to address GARs dynamic needs.