Promoting Appropriate Care for Children

Report on a Workshop on
Case Management Information Systems

January 2020

USAID
FROM THE AMERICAN PEOPLE

MEASURE
Evaluation

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ACKNOWLEDGMENTS

Cover

Participants in MEASURE Evaluation's Case Management Information System Workshop, December 4-6, 2019. Photo: Yvonne Usanase, MEASURE Evaluation, Palladium

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ABBREVIATIONS

APCA	United States Government Action Plan on Children in Adversity
CMIS	case management information system(s)
DCOF	Displaced Children and Orphans Fund
IT	information technology
M&E	monitoring and evaluation
MEval	MEASURE Evaluation
NGO	nongovernmental organization
OHA	Office of HIV/AIDS
OVC	orphans and vulnerable children
SOP	standard operating procedure
TOR	terms of reference
USAID	United States Agency for International Development
USG	United States Government

INTRODUCTION

Background

The United States Agency for International Development (USAID) works in countries around the world to improve the lives of the world's most vulnerable children in keeping with the three objectives established in the U.S. government strategy for Advancing Protection and Care for Children in Adversity (APCCA). Those objectives are to build strong beginnings, put family first, and protect children from violence (https://www.childreninadversity.gov). In support of key country priorities and in line with APCCA objectives, USAID/DCOF-funded activities focus on assisting families to better care for their children, reforming national systems for children's care, strengthening child welfare and protection policies, and developing and operationalizing the local systems needed to sustain program efforts. In March 2017, USAID/DCOF engaged the USAID-funded MEASURE Evaluation (MEval) project to build on and reinforce current USG programming on child care and protection in four focus countries: Armenia, Ghana, Moldova, and Uganda. MEval works globally to strengthen country capacity to gather, analyze, and use data for decision making to improve sector outcomes. The overall goal of this USAID/DCOF-funded activity is to intensify country leadership in advancing national efforts on behalf of children who lack adequate family care, that is, national care reform. MEval is working to strengthen the capacity of government partners to accomplish the following:

- Provide leadership in implementing a structured assessment of national care reform systems and strategies using a standardized framework/tool.
- Identify gaps and continuing needs in care reform.
- Develop plans to address priority needs.
- Establish indicators and systems for the regular assessment of progress and monitoring of results against country plans for care reform.

Efforts to build digital information systems have been made in the four focus countries, with lessons learned about what is working well and what can be strengthened. In light of the increased interest in advancing digital solutions for the case management[1] of children in various settings, USAID/DCOF asked MEval to convene a group of experts from December 4–6, 2019, at Palladium's office in Washington, DC, on case management information systems (CMIS).

Purpose and Participants

The workshop convened experts in case management and digital solutions to identify minimum standards for CMIS designed to help promote appropriate care for children. The main output of the workshop was a draft framework that can be applied when developing such systems, to ensure that the identified minimum standards are met, are appropriate, and are sustainable in different contexts. There were 42 participants (25 women, 17 men) from the USG (USAID/DCOF and the Office of HIV/AIDS [OHA]), UNICEF headquarters and its field offices, and case management experts and digital solution experts.

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[1] "Case management" refers to the process of assisting an individual child (and his/her family) through direct support and referral to other needed services, and the activities that caseworkers, social workers, or other social services staff carry out in working with children and families to address their protection concerns.

Representatives from the following countries attended: Armenia, Cambodia, Ghana, Guatemala, Kenya, Moldova, Uganda, and the United States. Appendix B provides the participant list.

Workshop Format

MEval designed the workshop to build participant consensus on the minimum standards for CMIS. The workshop agenda is given in Appendix A. It was conceived to be system-agnostic, focusing on the types of information needed from a case management system to ensure that children are in nurturing, loving, protective, and permanent family care. The agenda and content were based on responses to a pre-workshop questionnaire. It was highly interactive and used the following methodologies to achieve its objectives:

- Panel discussion to review opportunities and challenges when developing a CMIS in development settings.

- Ignite presentations to learn about existing CMIS that promote appropriate care for children.

- Case studies to encourage the development of systems starting with the child in mind.

- Group work with master posters where the journey of a child was drawn and how he/she interacts with the system was illustrated; this fostered learning across disciplines, especially between case management experts and digital solution developers.

- Plenary exercises to provide all participants with an opportunity to contribute to the key measures of CMIS success and standards.

The workshop results were assessed at the end of each day by asking participants what they liked the most and what they would change for the next day (Appendix C). The workshop agenda was adjusted each day to take the feedback into account; for example, a "Failfest" was added where participants openly discussed how systems they had developed failed and why, thereby creating more linkages between the workshop objectives and group activities.

Report Organization

This report outlines the workshop sessions and provides highlights, key discussion points, and action items. The framework will be presented as a separate report.

WORKSHOP OPENING

The workshop opened with introductions, a review of the workshop purpose and agenda, review of the pre-workshop summary results, and special remarks by Sarah Gesiriech, the United States Government Special Advisor on Children. Participant expectations of the workshop were also reviewed and an explanation was provided on how those expectations were planned to be met.

PANEL DISCUSSIONS

Following the welcome speeches, the workshop opened with a panel session on opportunities and challenges in designing CMIS in development settings. The panel was composed of four experts selected to provide various perspectives on the discussion topics, as presented in Figure 1. Molly Cannon, Activity Lead for MEval, moderated the panel discussion. There were a few questions developed based on the pre-workshop questionnaire, and time for periodic questions and answers was allocated throughout the session. Below, key discussion points by primary questions asked are highlighted.

The first set of questions addressed to the panel were: Why do you think having a CMIS is important? What needs do CMIS address? What do they enable that was not possible before? The panel members highlighted the difficulties encountered analyzing the progress of child protection reforms and resource planning when data collection, aggregation, and reporting are paper-based. In the absence of a digital information system, challenges also arise when trying to track progress in the planned child outcomes and to manage diverse information deriving from the specific needs of each child and family. The data use process is hindered when data are fragmented, obsolete, or not routinely available. Case management involves dealing with multiple stakeholders at various levels and communication among them, which is challenging when relying on traditional channels.

Figure 1. Panel discussion experts

According to the panel members, a CMIS allows faster processing, aggregation, and analysis of a large volume of data to inform evidence-based decision making; more efficient planning of workforce and financial resources; improved accountability for child outcomes; streamlining of communication across stakeholders and various information systems; and improved case management processes by being able to track the child in the protection system and following family reunification, identifying gaps, and addressing the challenges for sustainable reintegration in the family and community.

Workshop participants asked the panel to comment on the ways a CMIS enhances accountability. The response was that such a system supports a more transparent assessment of the level of effort compared with the invested resources, and provides data that can be used to make decisions based on evidence. It was nevertheless agreed that a data use culture needs to be developed, in addition to the implementation of an information system. It was also made clear that a CMIS cannot and should not replace the case management process or the decisions that a caseworker makes in the best interests of a child. The first accountability is to the child and the family, and the information system should facilitate it. If the system constitutes a barrier, it is a serious problem and should be reconsidered as a matter of urgency.

There were some concerns among workshop participants that entering data in the CMIS could be too time consuming and, therefore, detrimental to the direct interaction of the caseworker with beneficiaries. It was agreed that filling in papers is also time consuming, and that the transition from a paper-based system to an electronic system would not be successful if caseworkers did not first internalize very well the case management process and were not sufficiently confident in the practice before entering data electronically. One panel member also mentioned that the CMIS should have a user-friendly interface and that the caseworkers should see the benefits of using the system in terms of their work efficiency and the results for the child.

The second set of questions addressed to the panel were: What has worked well to ensure that the CMIS accomplished what it needed to? How did it help people do their jobs better?
According to the panel members, the systems that allowed data to be collected offline in the field and entered in the system at a later stage proved to be very useful for caseworkers. It was also mentioned that systems that were simple and easy to use were much appreciated. The panel members reminded participants that contexts are country-specific; however, the main principle that should be followed is designing the system around user needs.

Workshop participants requested the panel to share experiences with the use of information systems to support case referrals. Caseworkers appreciate integrated information to avoid a manual process of getting information from other sectors (health, education, police, justice, etc.). In practice, this proved to be challenging because it required interoperability of systems across sectors based on data sharing agreements, data standards, and solutions for unique identifiers of children. In cases where different organizations/sectors used the same system, cross-referral proved to be easier.

The last question addressed to the panel was: What is the most important consideration for scaling up and sustaining a CMIS? The panel members stressed that the main consideration for scaling up a system up was that the system facilitates the work of the case manager and aggregates data across the systems to inform decision making. To scale up, a realistic assessment of the country situation in terms of information technology (IT) literacy of the workforce and available infrastructure (hardware, software, internet access, etc.) should be conducted. Panelists also discussed that system design should be based on consultations with policymakers, users, and system developers. As far as sustainability is concerned, several prerequisites were highlighted, including: government ownership of the system; governance structure of the system (only one person or only a specific company knowing the source code should be avoided); clarity on the roles of the government and other stakeholders for making decisions on changing the system (e.g., adding new indicators, revising existing ones, including a new module); documented architecture of the system, flexibility, and adaptability based on emerging needs; mid-to-long-term planning of resources to ensure the system's smooth functioning and maintenance; and adequate and continuous training of users to address high staff turnover in the social sector (e.g., embedded in the mainstream pre-service training curriculum and in the induction training package for new staff, use of training-of trainers, webinars, and online training platforms).

There was discussion around the issue of data security, especially when there are multiple users and, therefore, a higher risk of confidential information about children leaking. It was agreed that confidence in the system is built only when there are strict user access rules and privacy policies, including the consent of parents/carers/guardians, determined by each country in accordance with national legislation and international good practices.

IGNITE PRESENTATIONS

Workshop facilitators invited participants to present their organization/project's use of a CMIS using the Ignite format. Ignite sessions are as a series of five-minute presentations, with each presenter using 20 slides, which auto-advance every 15 seconds. Day one highlighted six different country systems, outlining the objectives of the system; the problem it was created to solve; what the system does/how it works; target users; how it integrates with the social and/or health/education services delivery systems at community, district, and national levels; achievements to date; and lessons learned about system creation and maintenance. Copies of the presentations can be found on the MEASURE Evaluation website, here: https://www.measureevaluation.org/resources/workshop-on-promoting-appropriate-care-for-children/.

The following six systems were presented:

1. OSCaR is a database developed under the Family Care First project in Cambodia. It is designed for use by nongovernmental organizations (NGOs) that work directly with children. It is not a government system, but stakeholders are currently exploring how to interoperate OSCaR with Primero, an open source software platform for child-protection information management. Presented by Chris Ellinger, Children in Families (OSCAR).

2. DHIS2 Prototype was developed in early 2019 as a proof of concept in Moldova under the MEval project. It shows how case management performance indicators and outcome indicators can be displayed to support the decision making of caseworkers, supervisors, and district-level staff. Presented by Meghan Kill, BAO Systems.

3. Primero (introduced above) is a digital public good at a global scale. The system is getting ready to roll out in Ghana. Presented by Robert McTavish, UNICEF headquarters.

4. The Child Protection Information Management System (CPIMS) is the Government of Kenya's management information system for child protection and for the United States President's Emergency Plan for AIDS Relief orphans and vulnerable children (OVC) implementing partners' data. The system is currently operating in 40 counties in Kenya. Presented by Joseph Mugah, HealthIT, and Polycarp Otieno Tupime Kaunti.

5. The Manuk database is the Government of Armenia's information management system for children. It was developed in 2003 to capture the number of children in orphanages and has undergone various stages of development. The system is being revised to add indicators. Presented by Mira Antonyan, Fund for Armenia Relief Children's Support Center.

6. Children's First Software was piloted in Uganda as a database used by registered children's homes. Pilots are taking place in other countries. Presented by Lisa Frazier, Tyler Technologies.

There were no specific questions and answers following these Ignite presentations. Participants wrote down questions on Post-it notes during each presentation; the following day; each presenter had time to answer questions during the morning plenary. Each presenter was also available during lunch on Days 1 and 2 to showcase their systems.

FAILFEST

In response to a request by workshop participants to learn more about what should be avoided when designing a CMIS, a "Failfest" was organized on the spot, during which several participants volunteered to share their challenging experiences with the group.

The following lessons were drawn from their presentations:

- The information system should be designed with a clear scope in mind and should be used accordingly. Any attempt to use it beyond the scope for which it was originally designed will not work; one size does not fit all.

- The engagement of all key stakeholders in gathering information on system requirements is crucial, but it should not dictate system development. An information system has its own limitations and cannot replace the caseworker and the case management process.

- Be aware of possible political pressures and transparency challenges, for example, in the use of a specific proprietary software.

- Good initial planning and planning for transition to government ownership from the beginning help avoid system failures later on.

- It is important to do a realistic costing of system design, development, and maintenance.

- To ensure that the system is used, it is important to be aware of the technology literacy of users and plan appropriate training.

- Attention should be paid to recruiting the right system developers, based on detailed terms of reference (TORs), and track records in developing similar systems in similar country contexts.

CASE STUDY EXERCISES

Participants were presented with six hypothetical case studies about children facing adversity or in need of appropriate care and protection to provide context and inform discussions on case management needs and processes, measures of success in case management, and service and information needs for each case. The six case studies included a description of the children's interface with and journeys in the protection system across different countries. The case studies are provided in Appendix D. The objective was to illustrate the wide range of situations and needs of children that require individualized case management and support services, as shown in Table 1. Workshop participants were divided into six working groups, composed of six to nine content area and information system development experts. Each group was assigned one case study and conducted a series of activities. The first set of activities centered on the child's journey and aimed to uncover contextual information for the case and the case management process that would then inform the second set of activities, which centered on CMIS design considerations.

Table 1.Case study topics

Case #	Country	Case Study
Case #1	Armenia	A child with a disability in need of specialized services to prevent separation
Case #2	Moldova	Child removed from the home because of a protection issue and in need of temporary foster care placement
Case #3	Moldova	A child whose parents are in another country left with kin
Case #4	Uganda	Child reunified from residential care into a household in need of support services
Case #5	South Sudan, Kenya	Child separated from family in an emergency
Case #6	Ghana	Neglected child removed and placed in residential care and subsequently adopted domestically

Child's Journey Mapping

The groups completed a series of activities, as described below, culminating in the creation of posters, each one mapping the journey of a child through the child protection system, based on case management.

Activity 1A: Each group reviewed and contextualized the assigned case study by describing the country context. In particular, participants described the most significant challenges faced by the country and the technology landscape. This activity had two aims:

1. To identify challenges and situations in specific countries that increase children's vulnerability and undermine the protection of vulnerable children (for example, certain laws that may exist or political stability issues)

2. To identify possible technology conditions for case management (for example, what is Internet access like throughout the country and what is the computer literacy of potential users?)

Activity 1B: Participants in each group completed a series of posters to map a child's journey through the care system, based on the case study assigned to that group. (Figure 2 offers an example of these posters.) Participants were also asked to identify measures of success based on the child's perspective.

Figure 2. Example of a journey map created by workshop participants
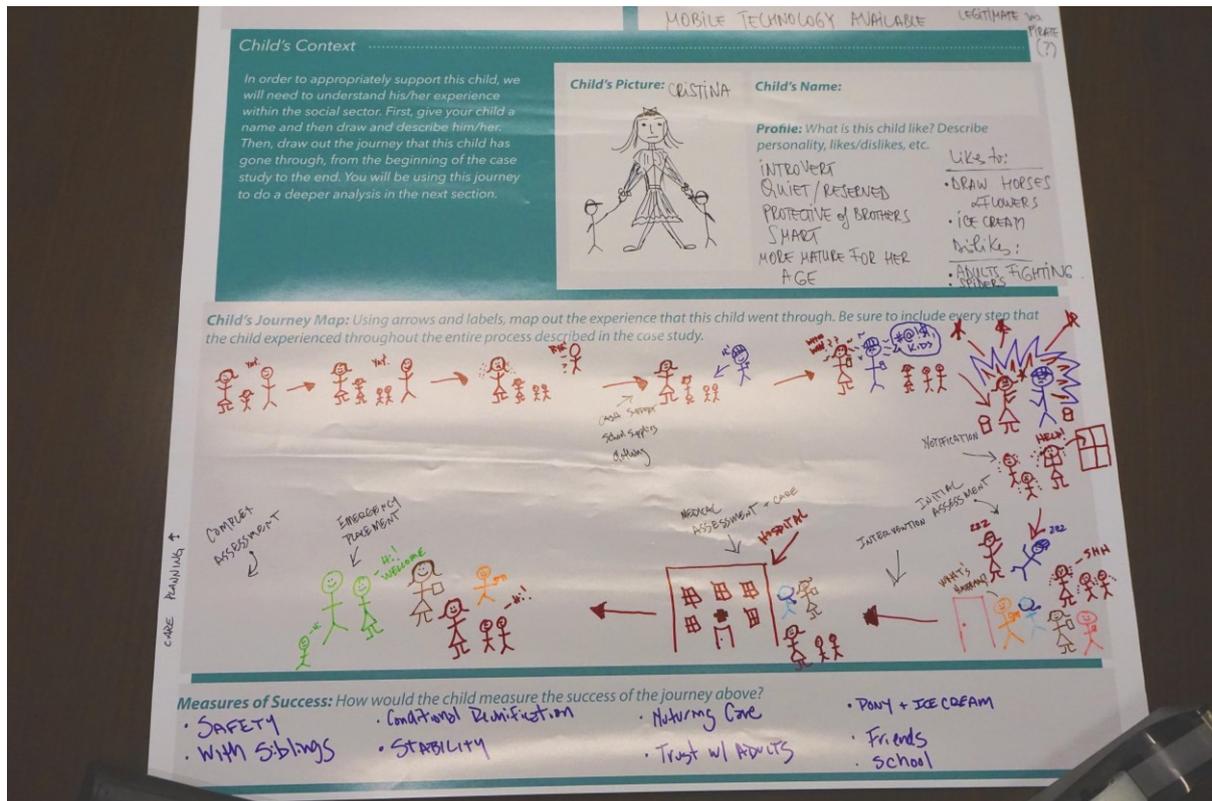
Metrics to Measure Case Management Success: Child's Perspective

An effective child protection system should respond effectively to individual child protection cases when they arise. As part of Activity 1b (described above), participants were asked to describe three to five metrics to measure case management success from a child's perspective. Across the groups, the following measures were outlined: stable family or community placements, family/parental contact (especially for separated children), physical health, safety, school attendance and education achievement, and social and emotional well-being.

Activity 1C: Based on the specific case study, each group was also asked to map the child's journey from the system perspective. Participants did this by identifying the services and/or support provided by key actors across different levels and defining the relevant information needs and communication flows at different levels.

CMIS Design Considerations

The second day of the workshop focused on identifying and discussing key considerations for designing and implementing a sustainable CMIS solution, building on the results of the work conducted the previous day. The six working groups implemented another series of activities, as follows:

Activity 2A: From the Journey Map activity and the previous work, each group was asked to create a list of potential use cases for a CMIS. For each use case, they were asked to describe the technology options that could fit the respective use case. The groups identified the main actors who would use the system and the practical ways that they would do that.

Activity 2B: In this activity, each working group mapped key considerations and opportunities for designing a CMIS that would serve the selected use case. To orient their work, the groups responded to several questions related to: (a) interoperability (where will data and information come from?); (b) data ownership (where will data be stored and who will own them?); (c) privacy and security (how will privacy/security be addressed?); (d) devices and access (who will have access to what devices?); (e) data standards (what data standards will need to be upheld?); (f) data quality (what data quality processes will be put in place?); (g) partners (will any external partners be involved and why?).

Posters with the designed solutions resulting from activities 2A and 2B were displayed, and a representative from the appropriate group was stationed at each one. The participants were invited to visit the posters to ask questions and exchange ideas and experiences.

Activity 2C. The day continued with a session during which the groups were asked to fill out a survey, providing a comprehensive overview of the elements that need to be considered for the implementation of a CMIS and its sustainable functioning.

The survey posed the following questions:

- *Key partners:* Who are our key partners? Who are our suppliers? What activities do they perform?
- *Value propositions:* What value do we deliver to the user? Which of the user's problems are we trying to solve? What products/services are we offering the users?
- *Key activities:* What activities do our value propositions require?
- *User relationships:* What type of relationships do we need to establish with our users?
- *User segments:* For whom are we creating value? Who are our most important users?
- *Channels:* Through which channels do our users want to be reached? Which ones will we use?
- *Key resources:* What resources do our value propositions require?
- *Cost structure:* What are the most important costs inherent in our model?
- *Funding streams:* For what value are our funders willing to pay? What do they currently pay for? What would incentivize them to pay for this model?

The results of these activities were used to inform the sessions on measures of success from a user's perspective and on the standardization and content of the guidance document, which are presented below.

MEASURES OF SUCCESS FOR THE SYSTEM USERS

During an earlier session, workshop participants brainstormed measures of case management success from the perspective of children. In this session, they were asked to reflect on the measures of success from the perspective of CMIS users. Their responses are summarized in Figure 2. The identified measures of success could inform the formulation of indicators to be embedded in a monitoring and evaluation (M&E) framework for CMIS.

Figure 3. Measures of success for system users

Caseworker	• More efficient use of working time • Improved and updated case files • Streamlined documentation requirements • More efficient and effective reporting • Facilitated case management through a standardized approach • Easier handover of cases
Supervisor	• Quicker problem identification at the level of workforce or working practices • Higher-quality supervision through better access to records • More efficient caseload management among team • Facilitated assessment of caseworkers' performance
Community	• Improved coverage rate of children in need by community services • Transparency of community resource allocation • Increased awareness of the need to develop an inclusive community environment for recently reunified children
Rayon	• Identification of gaps in service provision • Improved planning of services across the district • Data availability for evidence-based resource allocation • Facilitated advocacy of more state budget transfers to cover rayon needs
National level	• Improved governance • More effective geographic targeting of resources to areas in need • Improved monitoring of trends • Better accountability for used resources • Increased national capacity to report on international commitments (Sustainable Development Goals, Convention on the Rights of the Child, etc.)

CONSENSUS BUILDING ON STANDARDS

Based on their review of the system design and canvas posters, participants created a list of CMIS elements that could be standardized. The working groups then reviewed the list to create a single comprehensive list. Each group presented its findings to come up with an overall summary of the key elements that could be standardized. Workshop participants agreed on the resources, tools, and elements that could be standardized to ensure the appropriate and responsible development of a CMIS, including proper enablers of system development, the right content, and appropriate technology functionality based on user needs.

Enablers

- Stakeholder mapping, assessment, and engagement tools
- Information and communication technology assessment tools
- Implementation plans: steps, roles and responsibilities, financing (cost categories, budget allocation for system development and system functioning, including maintenance)
- Data governance plan, including regular review of audit logs
- Data quality standards, data quality assurance, standard operating procedures (SOPs), and checks
- Audit trails/protocols, data validation
- Data security SOPs, including data sharing agreements, data exchange protocols, and consent agreements
- Privacy and security, two-factor authentication
- Role-based access, including principles, criteria (best interest determination), roles of system administrator and database administrator (standard TORs)
- Data storage; back-up and restoring options; data retention policy
- Data standards
- Data dictionary
- Training/capacity strengthening plan, including IT literacy
- Communication strategy
- Decommissioning process

Content

- Case management standards: workflow, timelines, taxonomy of care interventions options
- Standard forms for intake, assessment, individual care plans, mandatory reporting, etc., with customization
- Standard registration of a child: unique identifier; basic level of information about the child; family and community context data; parameters for data and metadata; formatting (same as for assessment, individual care plan, etc.)
- Family and facility registration

- Typology of services for referral

- Performance indicators

- Built-in data visualizations, such as dashboards

- Training materials/curricula for data entry and system use

- Hotline

- Terms of use templates

System Technology and Functionalities

- Approaches for mobile applications and use of smartphones, web applications, and mobile device management

- Interfaces: human/analogue/digital

- Referral functionality

- Allow feedback from supervisor

- Data aggregation for reporting

- Interoperability with other systems (privacy concerns, purpose)

- Cross-language capability

- Geographic information system (GIS)

- Offline data entry

- Change logging

- Possibility to migrate historical data to the system

- Alerts/duplication check-ups

Participants agreed that if there is an irreconcilable conflict between social workers focusing on case management versus their time spent on an information system, priority should be given to the case management process itself. Workshop participants also agreed that any work on developing a CMIS should be based on practices that are already working well in the country.

FRAMEWORK DOCUMENT

Workshop participants agreed that the preparation of a framework that includes elements that can be standardized would be helpful to ensure that best practices are used to develop digital solutions. Intended users of the framework are governments, donors, system designers, technology developers, and any other organizations working on systems strengthening.

The document should include information on the processes, content standardization, and technology that the users need to be aware of when funding, designing, and implementing a new CMIS or improving an existing one.

Apart from the main sections mentioned above, workshop participants agreed that the document should include a call to action advising governments, donors, professional communities, and civil society activists on practical ways to engage communities of users and disseminating the good practices contained in the document.

Participants made the following suggestions for the document, saying that it should be:

- Written in an accessible language, including examples, dashboards, other useful visuals and videos, so that it is easily understood by people who are not IT specialists

- Practical, explicit, and concise

- Realistic, considering the various country contexts

- Reflective of failures, including dos and don'ts

- Capable of being further developed in an interactive way, by posting it on a website

Participants also proposed that the framework document distinguish between the minimum and desirable requirements of a CMIS. The document should also be clear about what such a system would and would not be able to support.

RESOURCES

Several resources were suggested that can inform the development of the framework, as follows:

- Digital Square's Global Goods Guidebook (to promote reusing systems): https://digitalsquare.org

- Family Care for Children with Disability: Practical Guidance for Frontline Workers in Low- and Middle-Income Countries: https://bettercarenetwork.org/sites/default/files/FamilyCareGuidance_508.pdf

- Responsible Data for Children: www.RD4C.org

- Responsible Data: The Engine Room: https://www.theengineroom.org/

- Various case management packages: KCHPF, 4children, Inter-Agency

- Inter-sectoral case management toolkit (UNICEF/ESARO)

- General Data Protection Regulation: https://eur-lex.europa.eu/legal-content/EN/TXT/HTML/?uri=CELEX:32016R0679&from=EN - General Data Protection Regulation

- Principles for Digital Development: https://digitalprinciples.org

- Digital Public Goods Alliance (examples of governing collaboratively): https://digitalpublicgoods.net

- Case studies and open data framework visualized as a periodic table: Open Data Impact Map: https://www.opendataimpactmap.org/

- ICRC's Restoring Family Links: photographs with IDs are used to help find family members: https://familylinks.icrc.org/en/Pages/Medias/Pictures.aspx?start1=31

- PATH's Planning an Information Systems Project: A Toolkit for Public Health Managers: https://path.azureedge.net/media/documents/TS_opt_ict_toolkit.pdf

NEXT STEPS

At the end of the workshop, the following next steps were agreed on:

- The MEval team will send a follow-up survey to all participants to evaluate the overall satisfaction of the workshop and gather constructive feedback.

- The MEval team will finalize a workshop report [this report] that includes relevant annexes, contact lists, and presentations for all workshop participants.

- The MEval team will develop a draft framework to be shared with workshop participants in early March 2020. MEval will incorporate feedback and finalize the framework by the end of March 2020.

- Participants agreed that in the future, the framework should be endorsed by other key actors and validated at other events, such as through regional meetings or workshops.

- The following additional actions should be pursued after validating the framework:

    - Develop a dissemination strategy

    - Determine whether the Better Care Network could host the document on its website.

    - Identify dissemination allies/channels and conferences, e.g. UNICEF, bilateral donors, International Social Service/Geneva, Global Social Service Workforce Alliance and other social work agencies, Changing the Way We Care, youth organizations, Sexual Violence Research Initiative (Linda Richter), RELAF (Latin American Foster Care Network), ISPCA [abbreviation not explained by the workshop participant], REPSSI (East/South Africa), and national governments.

    - Consider the gradual expansion of the framework: donor expansion; government expansion; and private sector expansion (Google, Apple, Microsoft).

WORKSHOP EVALUATION RESULTS

Twenty-four participants completed the post-workshop evaluation survey. The survey had 17 questions, with the majority using a sliding scale, scoring the respondents' level of agreement from 1 (strongly disagree) to 10 (strongly agree), and a few allowing for open-ended responses. Some participants chose to skip certain questions.

All participants felt that they learned about the different CMIS and identified things that they would do differently in the development and use of a CMIS. Participants reported positively on the workshop presentations and breakout group work sessions. All respondents strongly agreed that the panel presentations and Ignite presentations were interesting and relevant to their work. All respondents found the case studies very useful, as well as the Journey Map Analysis (used to map the child's profile specific to his/her country context) and the Designing of a CMIS Exercise (used to identify users, technologies, and mapping key considerations) when thinking through the development of a CMIS. In addition, all respondents found that the Measures of Success session helped their groups identify the different actors' perspectives of what defines a successful CMIS. Last, all respondents felt that the workshop activities connected well with the workshop objectives, agreed that potential minimum standards were developed, and found the facilitators to be knowledgeable about the materials presented.

When asked what aspects participants found most helpful or valuable about the workshop, their responses focused on:

- CMIS basics: Why they are needed, requirements/standards, roles and responsibilities, and overarching challenges

- Workshop structure: Participants highlighted the collaborative and interactive nature of the activities and group work sessions

- Exchange of experiences: The opportunity to share experiences on country-specific systems and challenges and to learn about other country contexts

- Networking opportunities: Participants valued the time available to connect with their peers and learn about their work

- Diversity of participants: Many noted their appreciation of the blend of representatives from the donor level, system experts, and program experts, which they said fostered an environment for cross-learning.

There were several suggestions for improvement. The respondents suggested that the workshop should have:

- Offered more time on CMIS system presentations

- Covered other types of information systems, specifically those related to systems for social work

- Discussed the pros/cons of software currently on the market and what works versus what does not

- Discussed the applications "UI/UX"

- Allotted more time for groups to discuss next steps and future commitments

Overall, the workshop was rated a big success. The participants, including donors, offered verbal and written feedback praising the structure and content of the workshop. The evaluation results support this, with all respondents strongly agreeing that the workshop met their personal goals and expectations; all felt that there were adequate opportunities for networking. All respondents rated the quality of the workshop a 10 out 10, with 95 percent believing that the group should meet again. Recommended issues for discussion in the future were sustainability and ownership; mapping the use of digital CMIS around

the world and further discussion of lessons learned from existing systems; data standards for child protection and care; CMIS data use; review of the framework/call to action; and firming up the discussion on minimum standards/guidelines for developing a CMIS with a plan for drafting, dissemination, and adoption of standards.

APPENDIX A. WORKSHOP AGENDA

Promoting Appropriate Care for Children
Workshop Agenda

	Day 1	Day 2	Day 3
8:30–9:00	Coffee/light breakfast		
9:00–9:30	Welcome by USAID/DCOF Introductions	Recap of Day 1 and intro to Day 2	Recap of Day 2 and intro to Day 3
9:30–10:30	Moderated Panel: Discussion of opportunities and challenges in developing case management information systems (CMIS) in development settings	Activity 2a: Identification of users and technologies *(Poster: Designing CMIS)*	Review and discussion of systems designed, program plans, and measure of success
10:30–11:15	Ignite presentations of existing case management information systems	Activity 2b: Mapping of key considerations and opportunities *(Poster: Designing a CMIS)*	
11:15–11:30	Break	Break	Break
11:30–12:30	Activity 1a: Introduction of use cases and context development exercise *(Poster: Case Study Context)*	Activity 2c: Review of designed solutions	Next steps for validating, packaging, and disseminating guidelines
12:30–1:30	Lunch [System demonstrations]	Lunch [System demonstrations]	Lunch
1:30–2:45	Activity 1b: Development of child profile and mapping of case management needs and journey *(Poster: Case Study Context)*	Implementation and planning for sustainability session *(Poster: Canvas)*	
2:45–3:00	Break	Break	
3:00–4:15	Activity 1c: Mapping services and information needs *(Poster: Journey Map Analysis)*	Measures of success session	
4:15–4:30	**Close**	**Close**	

APPENDIX B. PARTICIPANT LIST

Case Management Information System Workshop

Promoting Appropriate Care for Children

Participants

Name	Title/Role	Organization	Country
Ana Scholl	Senior M&E Advisor	USAID/OHA	United States
Antoine Deliege	Child Protection Specialist	UNICEF Ghana	Ghana
Barbra Aber	4Children/Keeping Children in Healthy and Protective Families	4Children/CRS Uganda	Uganda
Beth Bradford	Technical Director	Changing the Way We Care/Maestral	United States
Bill Philbrick	Senior Associate, ICT/MIS/Systems	Changing the Way We Care/Maestral	United States
Caitlin Showalter	Monitoring and Evaluation Associate	MEASURE Evaluation	United States
Camelia Gheorghe	Child Care Reform M&E Consultant	MEASURE Evaluation	Moldova
Chris Ellinger	Social Work Technical Adviser	Children in Families (OSCaR)	Cambodia
Claudia Cappa	Senior Adviser, Statistics, Child Protection and Development	UNICEF headquarters	United States
Claudine Lim	Associate, Principals for Digital Development	DIAL	United States
Corneliu Tarus	Program Director	Changing the Way We Care	Moldova
Darren Jensen	Owner	Rotati (OSCaR)	Cambodia
Emmanuel Antwi-Boasiako	M&E Consultant	MEASURE Evaluation	Ghana
Florence Martin	Director	Better Care Network	United States
Georgina O'Hare	Head of Impact & Learning, Family Care First	REACT	Save the Children Cambodia (FCF)	Cambodia
Ismael Ddumba Nyazi	M&E Advisor	MEASURE Evaluation	Uganda
Jacqueline Bony	Team Lead, Nutrition and Social Protection	USAID/Ghana	Ghana
Jamie Gow	Technical Advisor (Program Design, M&E)	USAID/DCOF	United States
Jean M. Geran	Codirector, University of Wisconsin STREETS Initiative	University of Wisconsin [REACH]	United States
Joaquin Andres Blaya	Senior Health Advisor	World Bank	United States
John Williamson	Senior Technical Advisor, Children in Adversity	USAID/DCOF	United States

Name	Title/Role	Organization	Country
Joseph Mugah	Lead System Developer for the Child Protection Information Management System (CPIMS)	HealthIT	Kenya
Joshua Volle	Monitoring and Evaluation OVC	USAID/OHA	United States
Lisa Frazier	Technology Specialist	Both Ends Believing/Tyler Technologies	United States
Mattito Watson	Senior Technical Advisor, Children in Adversity	USAID/DCOF	United States
Maury Mendenhall	Senior Technical Advisor, OVC	USAID/OHA	United States
Megan Kill	Project Implementation Manager	BAO Systems	United States
Meritt Buyer	International Program Consultant	Keystone	United States
Michelle Li	Data Use Specialist	MEASURE Evaluation	United States
Mira Antonyan	Executive Director/President of Social Workers Association	Fund for Armenia Relief Children's Support Center	Armenia
Molly Cannon	Team Lead, Palladium	MEASURE Evaluation	United States
Molly Canty	Innovation Grants and Partnerships Manager	Dimagi	United States
Patty Mechaed	Strategy Advisor/Cofounder and Policy Lead	HealthEnabled	United States
Pavel Nabutovsky	Technical Lead t4d/Architect for Primero	Quoin	United States
Polycarp Otieno	Child Protection Specialist	Tupime Kaunti	Kenya
Rebecca Levy	Acting Division Chief, Empowerment and Inclusion	USAID/DCOF	United States
Robert Mactavish	Child Protection Specialist	UNICEF headquarters	United States
Rose Mokaya	Senior OVC Specialist	USAID/Kenya	Kenya
Sam Ol Um	Khmer Program Manager	Children in Families (OSCaR)	Cambodia
Sarah Gesiriech	U.S. Government Special Advisor on Children	USAID/DCOF	United States
Seghen Haile	Health Information System Advisor	USAID/OHA	United States
Stuardo Herrera	Technical Advisor, Informatics Palladium	MEASURE Evaluation	Guatemala

APPENDIX C. SUMMARY OF DAILY WORKSHOP FEEDBACK

Feedback December 4, 2019

<u>What did you like today?</u>

Case studies and the group discussions around them, which facilitated the capture of multiple perspectives on approaching a child at risk.

Ignite presentations on of various case management information platforms.

Food

<u>What would you like to see tomorrow?</u>

More information on the presented CMIS, e.g.,:

- How information flow informs system design
- What worked well and what didn't
- Challenges faced

More opportunities for discussion and exchange of expert opinions for an improved learning experience.

Feedback December 5, 2019

<u>What did you like today?</u>

The design of the CMIS:

- Based on case studies
- Having both the child and system perspectives in view
- The methodology used for its design, supported by structured and insightful exercises
- The overall process that each group went through to design, but also to improve it based on the review of other groups' work

Failfest, which triggered further discussion about the challenges that one can encounter when developing a system and reflection on what to avoid (four parts planning, one part doing to avoid throwing good money after bad).

Interesting discussions in the group; great interaction among group members

Food

<u>What would you like to see tomorrow?</u>

Actionable outcomes of the workshop.

- Summary of discussions
- Defined measures of success with the child and user in mind
- Next steps
- Convene again to agree on practical collaboration
- Clarity about whether we are developing an "ideal" framework or being realistic

More discussion on:

- Data protection
- Interoperability
- Open data structure

Working in different teams at different tables.

Share contact details of participants and presentations.

APPENDIX D. CASE STUDIES

Promoting Appropriate Care for Children

Case Studies

Case #1: Child with a disability, with a focus on arranging services and preventing separation

Arevik is a 10-year-old child with a severe mental disability. She lives with her father and her grandmother in Pambak, a village located five kilometers away from Vanadzor city (Armenia). Arevik's father works hard; he frequently works the night shift at a factory. The grandmother, currently retired, has been taking care of Arevik since her mother died seven years ago. She is trying to cope with the situation. There have been many times when the grandmother talked to her son about putting Arevik in a specialized orphanage or special school where, she thought, Arevik would be looked after in a more professional way—for example, with speech therapy, kinetotherapy, socializing with peers—because the grandmother has been growing weaker and weaker owing to a terminal illness. However, this decision has been too difficult to make and has been postponed.

Both father and grandmother know about a daycare center in the city, but it is too far away to be able to take Arevik. They heard from the postman who brings the pension to the grandmother about some people who are walking around in a nearby city and helping children like Arevik to talk, walk, and play. Initially, the grandmother did not pay too much attention to what the postman said, but her curiosity was stronger than her skepticism. So, she went to see the regional social service center to find out more and talked to the social worker case manager who confirmed that home aid support might be available. Finally, after a thorough assessment and following the registration of the grandmother's official request, Arevik was put on the list of children to be assisted at home by the mobile team.

Case #2: Child removed from the home because of a child protection issue and in need of temporary foster care placement

Cristina is a seven-year-old girl living on the outskirts of Chişinău, the capital city of the Republic of Moldova, with a mother who struggles with addiction, her mother's boyfriend, and two two-year-old twin brothers. Cristina's mother used to work as a saleswoman in a shop nearby, which was recently closed. Her mother's boyfriend is a day laborer in construction. Their circumstances are very difficult; they are unable to make ends meet. Cristina's mother is receiving a monthly child allowance for the children. Last autumn, the municipality provided her some cash support for the cold season; she also received some school supplies and clothing for her daughter from a humanitarian nongovernmental organization. Alcohol consumption is a usual fact of life in the household, and the small income the couple has is usually spent on alcohol.

One day, the neighbors heard Cristina's mother and her mother's boyfriend fighting. This was not unusual, because the two frequently quarreled, but this time the children were crying loudly and shouting for help. The neighbors immediately called the emergency number 112 and reported the case to the local police officer. He informed the mayor (guardianship authority), the community social worker, and the doctor who all went to the house. By the time they arrived, the children were sitting on the floor, frightened and whimpering as if they were afraid of waking up their mother and her boyfriend, who were falling asleep. Following an initial assessment, the children were removed from the house and brought to the hospital where it was determined that one of the twins had been beaten and Cristina had been sexually abused. The mayor issued a decision for the emergency placement of the children in foster care.

Case #3: Child's parents are in another country and the child is left with kin

Viorica is a 13-year-old girl living in Crihana, a small village located in Orhei rayon of the Republic of Moldova. Her mother went to Italy two years ago in search of work and left Viorica in the care of her aunt, without informing the authorities. Economic migration is a common coping strategy for many people living in Moldova, affecting about one-third of the population.

Viorica's aunt is a 38-year-old single mother with four small children. She has a secondary education and is a housekeeper. The family's only income is the child allowances, supplemented by some cash sent monthly by Viorica's mother. She heard from neighbors that some cash support might be available from the municipality, but she does not know how to access it.

The mother and her daughter used to talk weekly by Skype, except for the past two months, when there was no call from abroad and no money was sent.

Viorica is in the seventh grade at the village general school. She is an "average student," judging from her grades. The head teacher would describe her as a loner, having an introverted personality and finding it difficult to get along with her peers.

In the last school quarter, her school performance worsened, and the head teacher is concerned about her frequent absences from school. One of her schoolmates saw her three days ago working on the land of a family in the village, but she ran away when the schoolmate went to say hello to her. He reported this to the head teacher, who visited Viorica's aunt the next day. The discussions with the aunt raised some suspicions that Viorica may have been forced to work in the village to earn cash for the house. These suspicions were later confirmed when the head teacher, along with the community social worker, talked with the neighbors and with Viorica, who admitted that her mother's lack of contact and cash transfers in the last months made her aunt threaten to throw her out of the house unless she was able to earn some money.

Case #4: Child in residential care reunified into a household in need of support services

Elias is a 13-year-old boy. He was reunified with his mother in Mbale district, after spending five years in a children's home in Tororo district. Elias doesn't know the whereabouts of his father. His father borrowed some money from the bank to treat his leg after suffering a serious accident. He defaulted on the loan, leading him to leave home when Elias was just one year old. When he was eight years old, his mother decided to place Elias and his sibling in a children's home because she was unable to meet their basic needs. She was happy with this arrangement, because it meant that her son could access education while living at the children's home. She kept in touch with the home director and social workers throughout his stay in the children's home. Elias says he missed his family, but life at the children's home was easy, and for the most part, he didn't struggle for anything.

He currently lives with his mother, stepfather, and five siblings (between the ages of five and nineteen). The mother runs a small roadside food kiosk in Mbale town, which she started using the money she borrowed from a local savings group. The stepfather is a former soldier, who was wounded in battle and is currently wheelchair-bound and unemployed. They live in a dilapidated house in Namatala, the largest slum in Mbale Municipality. Elias and his siblings were unable to go to school this year because the mother could not afford the school-related expenses. They receive no help from local authorities.

Case #5: Child separated from family in an emergency situation

Eric is a 15-year-old boy living in Kakuma Refugee Camp in Northwestern Kenya. Clashes erupted between government and opposition forces in his town (in Otogo county of the Yei River State) earlier this year. Eric's house was destroyed, so his family decided to flee and seek refuge in Kenya. On the way

to Kenya, his family got the news that the route was becoming dangerous, so his mother and father decided to stay with his siblings in South Sudan. When they heard that the Opposition forces were searching the town for young men, they decided to send Eric ahead alone.

He found another 16-year-old child, Robert, who was also escaping the violent conflict. The two boys continued their way to Kenya. Eric and Robert arrived at the Kenya-South Sudan border, where they met other asylum seekers. They were registered by the United Nations High Commissioner for Refugees at a border collection point, fed, and driven to Kakuma refugee camp. Efforts are being made by caseworkers of an international NGO to trace Eric's family and the families of other unaccompanied and separated children. Simon, one of the caseworkers, interviewed Eric to learn all he could about Eric's family. The information will go into an interagency child protection information management system, along with a photo of Eric. Hopefully, his parents are still alive and will be found. Eric hopes that one day soon he will be reunified with his family. He worries about them and thinks about returning to South Sudan but is concerned that it is too dangerous.

Case #6: Neglected child removed and placed in residential care and then adopted domestically

Kwaku is a 14-year-old boy and has lived in four different places throughout his childhood. His father, formerly a factory worker, died from a work-related hazard. His mother became disabled after a motor vehicle accident. At 11, Kwaku left Kumasi and went to live with his paternal aunt, Auntie Janet—a single woman who made a living by providing water and soft drinks to young sellers who work on the busy roads of Accra. Kwaku had been promised stability in his education, which had been cut short following his father's tragic passing.

Life in Accra seemed like a whirlwind to Kwaku; he was constantly awakened by noises from cars as early as 4:30 a.m. Auntie Janet wakes up early to provide the necessary instructions to the young sellers. After two weeks, Kwaku realized that no mention had been made about his school enrollment. He mustered the courage to ask Auntie Janet, who informed him of the need to join the business as a seller to realize his dream. He was informed that all young sellers shared similar aspirations and were working to make that dream a reality.

Kwaku was, however, not as strong as these people and was soon seen as a liability. To pressure him to work harder, his auntie resorted to several punitive measures, such as starvation and denial of a sleeping mat. A gardener who lived next door witnessed this treatment and contacted a social worker in the neighborhood known for her support to vulnerable children. She met with Kwaku and offered to get him a place in a privately owned residential home where he could go to school.

Life here is relatively better, and Kwaku does not suffer inhumane treatment like in the past three years. He is also happy to receive support services from the social worker and, for once, has playmates. Owing to the government's renewed efforts to offer family-based alternative care for children like Kwaku, there has been a relatively high drive for adoption. One Saturday, Kwaku was called by the home manager and informed of a Ghanaian married couple interested in adopting him. He was counselled and given information on the processes and what it meant to be adopted. He liked the idea of returning to Kumasi to live with his new parents—Mr. and Mrs. Adom, who also seemed to be very good people with great plans for him. Kwaku was promised that another social worker in Kumasi would check up on him and ensure his safety and well-being.