**CASE 2 – OPERATOR**

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| **B’ Phase** |  |
| **History:** | The District Attorney, following a referral from a primary school teacher about a child she suspected is being maltreated, asked you (the Social Worker) to proceed with an assessment of the child’s living conditions.  The content of the phone call you received from the District Attorney was the following:  *“Good morning. I am [Name] and I am calling you concerning a referral we received from a school teacher about a 6-year boy that potentially suffers neglect from his family”. I would like to ask your services to proceed to an assessment of the living conditions of the child.*  *“The child’s name is Anton X. and lives at (address). His teacher, Ms Mary X informed me earlier today that the boy walked to school in below-freezing weather wearing only a long-sleeved shirt, long pants and tennis shoes. His feet were wet from the snow, and he was obviously cold. Ms Mary X called us because of repeated similar events; she had previously called Local social services to report possible neglect but it seems that the situation is the same”. Please send your report after you conduct the assessment.* |
| **Trainees’ ROLE:** | **Professional: Social Worker, dedicated CAN-MDS Operator in Central Child Protection Services** |
| **SETTINGS:** | **Place:** Family’s Home  **Conditions:** Following a referral submitted by a teacher to the District Attorney, he asked you to conduct an assessment of the living conditions of the child. **You are interviewing the child’s mother.**  **When:** During a site visit you conducted to assess the child’s living conditions. |

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| **Exercise:** | **Please record the incident.**  **The record is made in the context of a national surveillance system for child abuse and neglect** |
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* **Before starting the recording, explain to the person who you are interviewing that you will ask some questions in order to record the case in the system currently in place, which is a necessary step for further administration of the case**

***“Incident record\_Case 2\_Phase B”***

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| RECORD |  |
| Agency's ID | [auto-completed] |
| Operator’s ID | [auto-completed] |
| Date |  |
| Source of referral |  |

|  |  |
| --- | --- |
| INCIDENT |  |
| ID | XXXXXXXXX1-  [auto-completed CHILD ID + date of record] |
| Date |  |
| Location |  |
| Form(s) of maltreatment |  |

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| --- | --- |
| CHILD |  |
| ID | XXXXXXXXX1  [Code provided by the Surveillance System Administrator] |
| Gender |  |
| Age |  |
| School attendance |  |
| History of CAN |  |

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| --- | --- |
| Family |  |
| Composition |  |
| Primary Caregiver(s) relationship to child |  |
| Primary Caregiver(s) gender |  |
| Primary Caregiver(s) age |  |
| Other type(s) of violence |  |

|  |  |
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| Services |  |
| Institutional response |  |
| Referral(s) to Services |  |