1. **CASE INFORMATION**

|  |  |
| --- | --- |
| Date assessment started dd/mm/yyyy | Date assessment completed dd/mm/yyyy |
| Type of contact   * Home visit * Meeting at other location * Phone call * Other | Who was there? ***(***select all that apply)   * Child * Parent/caregiver * Other, please specify |
| Tick this box in case this is a re-opened case which was closed previously | * Yes, reopened case   Specify previous date of case closure dd/mm/yyyy |

1. **ASSESSMENT OF CURRENT SITUATION**

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| --- | --- | --- |
| Provide a detailed description of the child's current situation, covering various aspects of their life.  Focus on the objective information and list only facts.  *(****Note:*** *Do not ask questions that make the child uncomfortable or distressed, stop asking questions if you notice signs of distress)* | | |
| 1. Safety  *(For example, include whether they say they feel safe in their current arrangement and environment, places or situations in which they feel less safe or fear, what they do when they feel scared or unsafe, anyone they can go to, etc.)*   |  | | --- | |  | | | |
| 2. Family and other Caregiving arrangements  *(For example, include what the child shared about their relationship with their immediate family, with extended family members, etc.)*   |  | | --- | |  | | | |
| 3. Physical health  *(For example, include info about their health, any illness or health concerns, pain or discomfort they feel, ongoing medical treatments, pregnancy, etc.)*   |  | | --- | |  | | | |
| 4. Emotional wellbeing  *(For example, include anything they shared about their mood or how they feel, if there have been significant changes in how they feel, if there is anything that makes them feel stresses or anxious, if they have trouble eating or sleeping, how they typically cope with difficult emotions, etc.)*   |  | | --- | |  | | | |
| 5. Education | | |
| * Not following any learning programmes | * Following formal education | * Following only other leaning programmes other than formal education |
| *(For example, include details on their education)*   |  | | --- | |  | | | |
| 6. Friends and social network  *(For example, include info about their friends or who they hang out with, contact with neighbours or other community members, experience of exclusion, discrimination or bullying, participation to social activities, etc. )*   |  | | --- | |  | | | |
| 7. Work  *(For example, include responsibilities they have including of caregivers, describe any work done by them outside, the type of work, safety at work, how they feel at work, how much time spend daily or weekly, if they get paid, how is that money used, etc.)*   |  | | --- | |  | | | |
| 8. Legal situation and documentation  *(For example, include information about document they have and document they are missing such as ID cards, residency permits or any other document needed to move freely and access services, etc.)*   |  | | --- | |  | | | |

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| --- | --- |
| ***(Sensitive and Optional)* please avoid editing dropdown**  If the perpetrator is known, mark this category when possible.  ***Note:*** *This is an optional question and a child should never be forced to disclose when they don't feel comfortable doing so*   * Yes * No   If yes, select:   * *Family member* * *Intimate Partner* * *Peer* * *People with formal authority (Doctor, teacher, law enforcement, social worker etc)* * *Employer (formal and informal)* * *Staff of UN, NGOs etc, including peacekeeping forces* * *Armed force and non-state armed group* * *If other, specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_x* | |
| ***(Sensitive and Optional)* please avoid editing dropdown**  If the location where the incident happened is known, please mark the categories when possible.  ***Note:*** *This is an optional question and a child should never be forced to disclose when they don't feel comfortable doing so* | * *Inside the home* * *Outside the home* * *Places of education and vocational support* * *Medical facilities* * *Residential care facilities* * *Working places* * *Places of detention* * *Digital spaces and platforms* * *If other, specify\_\_\_\_\_\_\_\_\_\_\_* |

**3. VIEWS OF THE CHILD**

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| --- | --- | --- | --- |
| Describe the views and wishes of the child regarding their needs.  *(****Note:*** *Children can begin to communicate and explain their situation from around the age of 3 or 4, but the level of details and understanding will vary depending on their individual development and abilities)*   |  | | --- | |  | | | |
| Was the child seen individually when asking about their situation? | * Yes | * No |
| Describe the views and wishes of the parents, caregiver or trusted adult, regarding the needs of the child.   |  | | --- | |  | | | |

1. **ANALISYS OF SITUATION**

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| --- | --- | --- |
| Based on the information on the different elements stated above, list and describe **risk factors**, including safety threats, incidents and vulnerabilities of the child.   |  | | --- | |  |   Based on the information stated above, list and describe **protective factors**, including individual strengths, care and support available to the child   |  | | --- | |  | |
| Additional notes on the assessment   |  | | --- | |  | |

|  |  |
| --- | --- |
| Is a formal Best Interests Determination (BID) in coordination with UNHCR required  (*Note: BID a formal UNHCR process with strict procedural safeguards to determine what is in the child’s best interest when taking decisions affecting the child's life, in the context of asylum-seeking and refugee children including UASC).* | * Yes * No |

1. **AUTHORIZATION**

|  |  |  |
| --- | --- | --- |
| Caseworker name | Date dd/mm/yyyy | Signature |
| Supervisor name | Date dd/mm/yyyy | Signature |
| Comments supervisor *(For example, recommendations for next steps, additional information or any remarks)* | | |