

Case Management via Phone How To!

Facilitator Guide

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COURSE OVERVIEW

Course aim: To prepare case workers to safely deliver case management services via phone, when necessary, in the context of COVID-19 and other infectious disease outbreaks (IDOs).

Course objectives. By the end of the course, participants will be able to:

- Describe key challenges linked to delivering case management services via phone
- Illustrate key considerations when adapting the steps of the case management process via phone
- List key considerations regarding what to do before, during, and after a case management call
- Describe key considerations on how to handle serious distress over the phone
- Demonstrate how to conduct case management sessions by phone in a safe manner
- Demonstrate how to respond to difficult situations during a case management call

Course duration:

- 30-minute pre-training assignment
- Face-to-face: 2 days of face-to-face delivery
- Remote: 1 preparatory live online session of about 60 minutes, and 3 live online sessions of 235, 165, and 245 minutes, each
- 2 online group-coaching sessions of about 2 hours each

Target audience: Frontline caseworkers, social workers, and supervisors directly supporting children, caregivers, and families during the COVID-19 pandemic

Related competencies: 4.5 Developing strategies for case management, based on the *Child Protection in Humanitarian Action (CPHA) Competency Framework*, which means that the participant:

- Recognizes protection concerns for children, can identify risk and protective factors, understands the case management process, and has basic knowledge of international and national legal frameworks that promote the protection and care of children
- Uses core communication techniques for supporting children to increase child resilience and wellbeing, knows how to coordinate case management systematically, adheres to confidentiality protocols, and makes decisions in the best interest of the child
- Implements safe, ethical, empathetic, and inclusive case management services according to interagency guidelines

Prerequisites: Participants are expected to have a full understanding of the case management process, and must be able to make use of the learning within the module.

Agenda: Sample agendas for face-to-face and remotely facilitated module delivery are shown below. These can be adapted as required for your context.

Face to face: Depending on participants' availability and on the relevant logistic arrangements, it is important to make an informed decision on whether the sessions should be held on 2 consecutive days or with a break in between.

Day 1	
Time	Session
9.00 – 9:45	Introduction to the Training
9:45 – 10:35	Situating Case Management Delivery via Phone
10:35 – 10:50	Break
10:50 – 13:25	Case Management Steps via Phone
13.25 – 14:00	Lunch
14:00 – 14:50	Conducting Assessments via Phone
14:50 – 15:40	Before the Call
15:40 – 15:55	Break
15:55 – 17:00	The Case Management Call
17:00 – 17:30	Recap and Close

Day 2	
Time	Session
9:00 – 9:30	Welcome and Day 1 Recap
9:30 – 10:25	Managing Difficult Calls
10.25– 10:40	Break
10:40 – 12:40	Practice Intake Call (Part I - Calls)

12:40 – 13:30	Lunch
13:30 – 14:15	Practice Intake Call (Part II – Reflection)
14:15 – 15:00	Practice Safety Planning
15:00 – 15:45	Evaluation and Close

Online Coaching Sessions	
Length and Time Frame	Session
2 hours, 2 weeks after the training	Challenging Cases via Phone
2 hours, 4 weeks after the training	Safety Planning

Remotely facilitated sessions:

Depending on the participants' availability, the sessions can be delivered in 3 longer sessions or 4 shorter sessions. It is important to make an informed decision on whether it would be best to deliver the sessions over 4 consecutive days or over a longer period of time. It is recommended to not exceed 3 weeks to complete the whole session plan.

4-Session Option	
Session 1	60 min. Welcome and Intros Technology Intro
Session 2	235 min. Situating Case Management Delivery via Phone Case Management Steps via Phone Conducting Assessment via Phone
Session 3	165 min. Before the Call The Case Management Call

	Managing Difficult Calls
Session 4	245 min. Practice Intake Call Practice Safety Planning Evaluation and Close

Online Coaching Sessions	
Length and Time Frame	Session
2 hours, 2 weeks after the training	Challenging Cases via Phone
2 hours, 4 weeks after the training	Safety Planning

Equipment, materials and preparation required:

- 4 flipcharts
- Assorted colored markers (enough for 4 groups to use simultaneously)
- Post-it notes
- Share pre-training assignment a week ahead of the training

Supporting information:

- The content of this learning module is largely based on the “Case Management via Phone – Guidance during COVID-19.” It is recommended that the facilitator be familiar with that guidance note.
- The recommended group size is 12-24 participants face to face, 12-20 remotely facilitated.
- Contextualizing the course:
 - Some onboarding activities may need to be adjusted for appropriateness to the target audience.
 - If you have context-specific examples, these can be substituted in the practice scenarios.

Remotely facilitated version:

Platform-specific instructions have been avoided in the development of this course. Once you have identified which online platforms you will use, we recommend reviewing all the exercise instructions to ensure that they are clear and specific, to best enable participants to engage quickly and easily with the interactive elements of the course.

To deliver the exercises in this course, you will need the following technical platforms and tools:

- Video-calling platform with breakout-room and chat functionality
- Interactive online whiteboard with Post-it and drawing functionalities
- An online shared folder where participants can access key course resources

The specific preparation required ahead of each session is detailed in the session plans below, including sample layouts for online whiteboards.

It is essential that the facilitator and technical producer prepare the course together, to ensure that their respective roles and responsibilities are clear and agreed.

Note, the technical producer does not need any specific qualifications, only to be comfortable and confident using the chosen video calling platform to support the facilitator appropriately.

Overview of Sessions & Learning Objectives

Welcome and Introductions
<p>Session aim: To introduce participants to the course, each other and the facilitation team</p> <p>Session objectives:</p> <p>By the end of the session, participants will be able to</p> <ul style="list-style-type: none"> • Recall the structure and objectives of the course • Introduce the facilitator(s) and their fellow participants • Use key features of the remote learning platform(s) [Applies to remotely facilitated sessions only]
Session 1: Situating Case Management Delivery via Phone
<p>Session aim: To ground participants in the use of case management via phone in the context of COVID-19</p>
<p>S1. O1. Explain how case management services by phone work</p>
<p>S1. O2. Explain when case management services by phone might be used</p>

Session 2: Case Management Steps via Phone

Session aim: To introduce key considerations regarding case management steps when done via phone.

S2. O1: Explain the key considerations associated with every case management step when done via phone

Session 3: Conducting Assessments via Phone

Session aim: To further explore the complexities of completing a full assessment via phone.

S3. O1: List examples of key questions that can be asked when investigating the situation of a child or the child's caregivers

S3. O2: List ways information can be triangulated

S3. O3: Explain immediate actions to be taken when the safety of a child or caregiver is at stake

Session 4: Before a Call

Session aim: To explore key aspects of appropriately preparing to undertake case management phone calls.

S4. O1: Describe the preparation required for a case management phone call, as well as the ideal setting for a comfortable and productive conversation.

Session 5: The Case Management Call

Session aim: To explore key aspects of appropriately handling case management calls, from the beginning till the end.

S5. O1: Describe the key aspects of handling a case management call, from the beginning till the end.

Session 6: Managing Difficult Calls

Session aim: To familiarize participants with handling difficult case management calls in a safe environment.

S6. O1: List top tips on how to handle difficult case management calls.

Session 7: Practice Intake Calls

Session aim: To practice handling case management calls in a safe environment.

S7. O1: Demonstrate how to conduct case-management intake calls in a safe manner

Session 8: Practice Safety Planning

Session aim: To refresh the participants' knowledge of safety planning considerations.

S8. O1: Discuss key considerations regarding safety planning

Session 9: Evaluation and Close

Session aim: To collect participant feedback, recap key learning points, and close

S9. O1: Identify their key learnings from the course

S9. O2: Evaluate the course and provide feedback to the facilitators

Pre-Training Assignment

Instructions for the Participants

Be sure to complete the tasks below before you start the training session, and submit them to _____.

They should take you about 30 minutes to complete.

Watch this [short video animation](#) on delivering case management services via phone.

After you've watched the video, write down what you think case management delivered via phone is.

1. _____

Did the video raise any questions that you would like the training module to answer?

Please write them down below.

1. _____

2. _____



Welcome and Introductions

SESSION PLAN:

Session Length 	45 minutes face-to-face, 60 minutes remote (including an introduction to the technology)
Aim and Learning Outcomes 	<p>Session Aim: To introduce participants to the course, each other and the facilitation team.</p> <p>By the end of the session, participants will be able to</p> <ul style="list-style-type: none">• Recall the structure and objectives of the course• Introduce the facilitator(s) and their fellow participants• Use key features of the remote learning platform(s) [Applies to remotely facilitated sessions only]
Key learning points 	Not applicable for this session.
Related Materials & Supporting Information 	<p>The learning environment — behaviors that you may want to elicit from the participants include:</p> <ul style="list-style-type: none">• Respect• Punctuality• Willingness to listen• Openness to new ideas and perspectives• Readiness to learn• Readiness to share experiences• Confidentiality

<p>Preparation Required</p> 	<p>Preparation required for face-to-face training: N/A</p> <p>Preparation required for remotely facilitated training:</p> <ul style="list-style-type: none"> • The Welcome and Introductions section contains a 15-minute segment during which the facilitator introduces the participants to the key features of the selected video-calling platform, and to the other online tools that will be used during the course. The producer should design this section of the course once all the platforms have been confirmed. • You will need an online whiteboard for the learning environment section. No preparation or access for participants is required.
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Time	Facilitator Notes	Producer Notes	Screen/Resource
5 min.	<p>Welcome</p> <p>Introduce yourself and welcome the participants to the course.</p> <p>Show the slides and outline the course objectives and structure.</p>	<p>Start the call 15 minutes early and display the onboarding activity on the screen.</p> <p>The facilitator should welcome the participants by name as they join the call, and then introduce the producer, explaining that he/she will be available to answer any technology questions.</p>	<p>PowerPoint (PPT) slides 2 and 3</p>

<p>10 min.</p>	<p>Icebreaker</p> <p>Divide the participants into groups of around 4, and explain that they have 3 minutes to come up with a list of 5 things they have in common.</p> <p>Time the 3 minutes, then bring the groups back together and ask each group to share 1 or 2 examples of what they came up with.</p>	<p>Randomly assign participants to breakout rooms.</p> <p>Open the breakout rooms. Time 3 minutes.</p> <p>Close the breakout rooms.</p>	
<p>15 min.</p>	<p>Introductions</p> <p>Invite any co-facilitators and the participants to briefly introduce themselves to the group, giving their names, roles, and organizations.</p>		
<p>15 min.</p>	<p>Technical introduction</p> <p>Applicable to remotely facilitated sessions only</p>	<p>NOTE: This section needs to be developed by the technical producer based on the platforms and tools you will use in the course. The aim is to familiarize participants with the key features to enable them to quickly and easily engage with activities later in the course.</p>	
<p>10 min.</p>	<p>The learning environment</p> <p>In plenary, ask: <i>“How do we want to work together? What behaviors do we commit to, to make the most of our time together?”</i></p> <p>Facilitate the discussion and make a note of the commitments on a flipchart, then display this on the wall of the training room. Recap using slide 4.</p>	<p>Use the built-in whiteboard function or another online whiteboard.</p> <p>Producer should make notes as the discussion goes on.</p>	<p>PPT slide 4</p>
<p>5 min.</p>	<p>Wrap-up</p> <p>Wrap up this session, checking for any questions.</p>	<p>For remote sessions, use this time for a 5-minute screen break.</p>	



Situating Case Management Delivery via Phone

SESSION PLAN:

Session Length 	50 minutes
Aim and Learning Outcomes 	<p>The aim of the session is to ground participants in the use of case management via phone in the context of COVID-19.</p> <p>By the end of the session, participants will be able to</p> <ul style="list-style-type: none">• Explain how case management services by phone work• Explain when case management services by phone might be used
Key Learning Points 	<ul style="list-style-type: none">• Child Protection Case Management (CP CM) is part of the essential services that cannot be stopped suddenly, but instead require adaptation to this novel pandemic situation. Thus, continued support must be made available through adaptive measures, along with appropriate responses to the new child protection risks and concerns generated by COVID-19 and other IDOs. Case management services might need to be adapted to remote delivery.• Remote services can be defined as services provided through a technology platform — such as hotlines, chat apps or Short Message Service (SMS) — rather than in person. One of the ways to offer case management remotely is by phone.• While case management delivery via phone can be a useful way to protect both children and caseworkers in the context of an infectious disease outbreak such as COVID-19, face-to-face

	<p>meetings are recommended in the following instances:</p> <ul style="list-style-type: none"> - When a case is high risk - When severe physical abuse has occurred or is threatened - When sexual abuse has been reported or is suspected, and the alleged abuser is in the home or still has contact with the child - When a child is alone or abandoned, and is without adult care - When there is a threat of self-harm or a direct threat has been made by or to someone living in the same home as the child - When the parent/caregiver persistently makes excuses for the child not being able to talk on the phone, and it is impossible to follow up with the child, either directly or through an intermediary such as a community member or service provider
<p>Preparation Required</p> 	<p>Preparation required for face-to-face training:</p> <ul style="list-style-type: none"> • Draft slide 7 with key words and a definition received as a result of the pre-training assignment. <p>Preparation required for remotely facilitated training:</p> <ul style="list-style-type: none"> • Draft slide 7 with key words and a definition received as part of the pre-training assignment. • Set up a whiteboard and Mentimeter links.
<p>Related Materials & Supporting Information</p> 	<p>Not applicable for this session.</p>

Time	Facilitator Notes	Producer Notes	Screen/ Resource
5 min.	<p>Introduction</p> <p>Welcome the participants to the session and share the session aim and objectives.</p>		PPT Slide 5
10 min.	<p>Pre-training assignment</p> <p>Say: <i>“I am going to read through some of the key points you have used to describe case management via phone after watching the video that we shared for your pre-training assignment.”</i></p> <p>Instructions: Facilitator reads through 4 or 5 examples from the answers submitted.</p> <p>Say: <i>“Child Protection Case Management is part of the essential services that cannot be stopped suddenly, but instead require adaptation to this novel pandemic situation. Thus, continued support must be made available through adaptive measures, along with appropriate responses to the new risks and concerns generated by COVID-19 and other IDOs. Case management services should therefore be adapted to remote delivery.</i></p> <p><i>“Remote services can be defined as services provided through a technology platform — such as hotlines, chat apps or SMS — rather than in person. One of the ways to offer case management remotely is by phone.”</i></p>		PPT slide 6

<p>10 min.</p>	<p>Pre-training assignment questions</p> <p>Say: <i>“We are now going to look at some of the questions that you have thought of during the pre-training assignment. Please pick a card from the basket. Read the question out loud and stick the card on the dedicated flipchart. We are going to cover some of these questions. And as we progress through the training, we can remove the answered questions from the flipchart. We will look at ways to answer the outstanding questions together at the end of the training.”</i></p>	<p>Preparation: Set up 1 whiteboard titled “Questions on Case Management via Phone”</p> <p>Say: <i>“We are now going to look at some of the questions that you have thought of during the pre-training assignment. Please type them on the prepared whiteboard, accessible via this link.”</i></p> <p>Instructions: Read the questions that are popping up on the whiteboard.</p> <p>Say: <i>“We are going to cover some of these questions as we progress through the training. We will look at ways to answer the outstanding questions together at the end of the training.”</i></p>	
<p>15 min.</p>	<p>Case management via phone: quiz on “when”</p> <p>Say: <i>“Let’s now think of when it is appropriate to use case management services via phone. I will read some statements, and together we can decide whether these statements are true or false:</i></p> <ul style="list-style-type: none"> • <i>During an infectious disease outbreak such as COVID-19, it is recommended to make all case management services follow a remote delivery modality. (False)</i> • <i>During COVID-19 and other IDOs, face-to-face meetings</i> 	<p>Preparation: Set up a Mentimeter poll that includes all the statements. Share a Mentimeter link via the chat function.</p> <p>Instructions: Review the answers for every statement, showing the Mentimeter slide on your screen.</p>	<p>PPT slide 7</p>

	<p><i>should continue for high-priority cases. (True)</i></p> <ul style="list-style-type: none"> • <i>Delivering case management via phone can be a useful way to protect both children and caseworkers during of an infectious disease outbreak such as COVID-19. (True)</i> • <i>Delivering case management via phone could last beyond the COVID-19 pandemic for cases that are low risk. (True)</i> • <i>The steps of case management are not the same when done by phone. (False)</i> • <i>Reviewing caseload prioritization during COVID-19 is key to effective case management via phone.” (True)</i> <p>Say: <i>“As mentioned earlier, case management services are essential services that cannot come to a stop in the midst of a pandemic. COVID-19 has, however, taught us that using the telephone can be a viable alternative solution during an infectious disease outbreak, when social distancing and other limitations are in place. In some instances, continuing case management services via phone might continue to be the preferred solution, even after the COVID-19 pandemic is over.</i></p>		
<p>10 min.</p>	<p>When is case management via phone not preferable?</p> <p>Say: Before we move on to the next session, let’s discuss instances when case management via phone may not be the preferred option. What do you think these instances are?</p>		<p>PPT slide 8</p>

Instructions: write a few examples on a flipchart and integrate them with points below:

- When a case is high risk
- When severe physical abuse has occurred or is threatened
- When there is actual or reported sexual abuse, and the alleged abuser is in the home or still has contact with the child
- When a child is alone or abandoned, and is without adult care
- When there is a threat of self-harm or a direct threat has been made by or to someone living in the same home as the child
- When the parent/caregiver persistently makes excuses for the child not being able to talk on the phone, and it is not possible to follow up with the child, either directly or through an intermediary such as a community member or service provider.

Say: *“These are general recommendations that tend to simplify case management, which is actually a very complex process. For example, while it is usually preferable to handle high-risk cases face to face, follow-up calls may be extremely useful to maintain close contact with these delicate cases. Have you had similar experiences?”*

Say: *“Additionally, if you absolutely cannot visit due to COVID-19 restrictions, but a visit is required, have a discussion with your manager/supervisor about who else might be able to visit safely — for*

	<p><i>example, trusted, well-trained community members; health officials; or the police. You could work remotely with these stakeholders as they conduct the visit on your behalf. This arrangement could only be made if agreed to by the child and if confidentiality protocols are respected.</i></p> <p><i>“Visits should only be conducted when guidance regarding hygiene and safety can be followed. Through the next few sessions, we will explore together key considerations when going through all the case management steps via phone, and we will reflect on the various phases of the calls.”</i></p>		
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Case Management Steps via Phone

SESSION PLAN:

Session Length	135 minutes
Aim and Learning Outcomes 	<p>The aim of the session is to introduce key considerations regarding case management steps when done via phone.</p> <p>By the end of the session, participants will be able to</p> <ul style="list-style-type: none">• Explain the key considerations associated with every case management step when done via phone
Key Learning Points 	<ul style="list-style-type: none">• See the “Case Management via Phone Tip Sheet.”
Preparation Required 	<p>Preparation required for face-to-face training:</p> <ul style="list-style-type: none">• Distribute the “Case Management via Phone Tip Sheet.” <p>Preparation required for remotely facilitated training:</p> <ul style="list-style-type: none">• Send the “Case Management via Phone Tip Sheet” to the participants.• Set up breakout rooms and whiteboards
Related Materials & Supporting Information 	<ul style="list-style-type: none">• “Case Management via Phone Tip Sheet”

Time	Facilitator Notes	Producer Notes	Screen/ Resource
5 min.	<p>Introduction</p> <p>Welcome the participants to the session and share the session aim and objectives.</p>	<p>Instructions: Start the call 15 minutes early and display an onboarding activity on screen.</p> <p>Welcome participants by name as they join the call.</p>	PPT slide 9
130 min.	<p>Exploring case management steps via phone</p> <p>Instructions: Form 6 groups. Set up 6 tables, each with a label corresponding to one of the 6 case management steps: intake/registration, assessment, case planning, implementation of the case plan, follow-up and review, and case closure.</p> <p>Say: <i>“We are now going to work in groups on a quite lengthy activity. On each of the tables we have placed a card corresponding to each of the 6 case management steps. One of the steps will be assigned to each group. Please discuss within your group key considerations regarding the implementation of this step via phone. Please note the key considerations your group makes on the flipchart. You will have 20 minutes to discuss and note</i></p>	<p>Preparation: Set up 6 breakout rooms and associated whiteboards with the 6 case management steps as titles (intake/registration, assessment, case planning, implementation of the case plan, follow up and review, and case closure).</p> <p>Divide the participants into 6 groups, and ask each group to discuss key considerations regarding the implementation of 1 of the 6 steps in case management via phone.</p> <p>Instructions: After 20 minutes, follow up with each group, asking them to move on to the next case-management step. Tell them to start their discussion of the next step by reviewing the points that were already made by the group that preceded them. For each additional step addressed by the groups, you will allow 15 minutes for discussion. Ask to add any additional thought on the whiteboard.</p>	PPT slide 10

your key points before moving on to the next table and step. For each of the other steps, you will have 15 minutes to read and discuss what has been suggested by your colleagues who preceded you, and note any additions that you would like to make.”

Instructions: Form groups and start the first round of discussions. After 20 minutes, have the groups rotate to the next step, allowing them 15 minutes for the next step and the other steps thereafter.

Once all the groups have gone through the 6 steps, give each participant a copy of the “Case Management via Phone Tip Sheet” (Annex I), which covers the key considerations for the case management steps via phone. Ask the participants to read through the sheet, and allow them sufficient time to do so. Ask if there are any considerations noted on the sheet that did not come up in their group discussions. Then ask if any of those considerations are unclear.

Once all the groups have gone through the 6 steps, send the “Case Management via Phone Tip Sheet” (Annex I) to each of the participants to read through and give them sufficient time for reading. Ask if there are any considerations on the sheet that did not come up in their group discussions. Then ask if any of those considerations are unclear.



Conducting Assessments via Phone

SESSION PLAN:

Session Length 	50 minutes
Aim and Learning Outcomes 	<p>The aim is to further explore the complexities of completing a full assessment via phone.</p> <p>By the end of the session, participants will be able to</p> <ul style="list-style-type: none">• List examples of key questions that can be asked when investigating the situation of a child or the child's caregivers• List ways information can be triangulated• Explain immediate actions to be taken when the safety of a child or caregiver is at stake
Key Learning Points 	<ul style="list-style-type: none">• Think broadly about those who might be able to contribute to your assessment (with the consent of the family, unless the child is at risk of harm), such as teachers, health providers, or community members. These may be people with whom you were in contact before the COVID-19 restrictions, or new people you may need to contact to learn more about the child's situation.• You might have to make many calls when conducting the assessment. Try to "paint a picture" through your conversations. Although you may need to ask for some factual information, try to also get a sense of what things are like in the child's home. For example, don't just ask "<i>How old is your son?</i>" Instead, follow up with questions such as "<i>Is he big or small for his age?</i>" or even "<i>Who does he look like?</i>" This is especially important when speaking to children for the

first time, but engaging questions like these can help deepen your connection to the families, as well.

- Ask to speak to individual household or family members (including siblings) on the phone, unless you think it would put the child at further risk; this is a critical consideration if abuse is occurring in the home. You will not be able to see the dynamics within the family, so it is important to give different people the opportunity to speak. Saying something like *“Since I can’t meet you all in person, I would like to speak to others living with you to help me understand the situation.”*
- As under normal circumstances, identify any unmet basic household needs, but also try to understand how COVID-19 is affecting the family. For example, families may have a higher need for food or cash support due to a loss of income. Referrals should be made as soon as possible to service providers, and updates should be provided regularly to the child, caregiver and/or trusted adult.
- If during the intake or assessment phase, you are concerned about the safety of the child or the caregiver, you must contact your line manager/supervisor immediately to discuss what can be done to keep the child safe. For example, will someone with the appropriate training be able to visit the household safely? Can other arrangements be made with trusted community members, government officials, family members, or services that can provide immediate assistance? Is there a place you can tell the child or trusted adult to go? Have alternative care options been mapped or updated?
- In all cases where there is a risk of violence or abuse, you must discuss safety plans with those concerned. If this has been considered previously then you will need to update the

	<p>safety plan with the relevant people, in case COVID-19 restrictions are likely to disrupt it.</p> <ul style="list-style-type: none"> Although you should always check that it is a good time to talk when speaking to children or trusted adults on the phone, it is especially important to immediately assess any concerns about safety. Additionally, it may be useful to agree on a code word or phrase that the person can say that will alert you to the fact that they do not feel safe.
<p>Preparation Required</p> 	<p>Preparation required for face-to-face training: Not applicable for this session.</p> <p>Preparation required for remotely facilitated training:</p> <ul style="list-style-type: none"> Set up breakout rooms and whiteboards
<p>Related Materials & Supporting Information</p> 	<p>Scenario</p> <p>Ines is 14 years old. She lives with her mother and 3 younger siblings in an informal tented settlement in Lebanon since her father died while fighting in Syria 6 years ago. Ines normally attends a school supported by a local NGO sponsored program while also participating in a project to generate a small income with other girls in the camp. She was referred to caseworkers when her mother was hospitalized with COVID-19. Ines no longer attends school or engages in the income-generation activities. It is unclear how she is supporting herself and her siblings financially. Her siblings are still attending school regularly.</p>

Time	Facilitator Notes	Producer Notes	Screen/Resource
5 min.	<p>Introduction</p> <p>Welcome the participants to the session and share the session aim and objectives.</p>		PPT slide 11

<p>35 min.</p>	<p>Say: <i>“As you have read in the “Case Management via Phone Tip Sheet,” conducting an assessment by phone will be more challenging because you cannot see anything. You will have to be creative in obtaining information for your assessment. This is particularly important for new cases, where you did not have any previous contact.</i></p> <p><i>“In 3 groups, read and discuss the scenario provided, and come up with a set of questions you would ask the child and other adults in the child’s life. Also indicate other actions you would take to further inform your assessment.”</i></p> <p>Instructions: Allow 15 minutes for discussion</p> <p>Ask 1 group to present the questions for the child, the second group to present questions for the adults, and the third group on other actions they would take.</p> <p>Say: <i>“During a case management call, you also need to rely on the tone of voice of the person you’re speaking with and on other clues, such as how long that person is pausing. Also, if you are asking questions, remind the other person that he or she is free to skip any question. This helps with building trust and ensures that there is no breach in ethics.”</i></p>	<p>Preparation: Set up 3 breakout rooms and 3 whiteboards to allow the groups to note their questions and suggested actions</p>	<p>PPT slide 12</p>
<p>10 min.</p>	<p>Safety of the Child</p> <p>Say: <i>“If during the intake or assessment phase, or at any point during the case management process, you are concerned about the safety of the child or their caregiver, you must contact your supervisor immediately to discuss what needs to be done to keep the child and/or caregiver safe. For example, will someone with appropriate training be able to visit</i></p>		

the household safely? Can other arrangements be made with trusted community members, government officials, family members, or services that can provide immediate assistance? Is there a place you can tell the child or trusted adult to go? Have alternative care options been mapped or updated?"

Say: *"Do you think that there was a safety issue in Ines's scenario?"*

Instructions: Allow the group to brainstorm.

Say: *"In all cases where there is a risk of violence or abuse, you must discuss safety plans with those concerned. If this has been considered previously then you will need to update the safety plan with the relevant people if COVID-19 restrictions are likely to disrupt it."*

"Although you should always ask if it is a good time to talk when calling children or trusted adults on the phone, it is especially important to immediately assess concerns about safety. Additionally, it may be useful to agree on a code word or phrase that the person can say that will alert you to the fact that they do not feel safe. Have you had any experience with situations like this? Can you tell us about it?"

"Depending on the situation, you can also suggest to the child/caregiver that they delete any trace of the conversation from their device, and that they store your contact number in a safe place. We will practice more safety planning later in the training."



Before a Call SESSION PLAN:

<p>Session Length</p> 	<p>45 minutes</p>
<p>Aim and Learning Outcomes</p> 	<p>Session Aim: To explore key aspects of appropriately preparing to undertake case management phone calls.</p> <p>By the end of the session, participants will be able to</p> <ul style="list-style-type: none">• Describe the preparation required for a case management phone call, as well as the ideal setting for a comfortable and productive conversation.
<p>Key learning points</p> 	<ul style="list-style-type: none">• Find a quiet and private location where you can concentrate on the call and have a confidential conversation.• Check you have a strong and stable phone or internet connection.• Have all the materials and equipment you need to implement case management by phone:<ul style="list-style-type: none">- Dedicated phone line for case management- Sufficient phone credit to cover your caseload- Ample battery supply on the phone and laptop (if used), as well as phone and laptop chargers- Writing materials such as paper, pen, etc.- Headsets, so you can take notes during the call and access information to share- Backup phone line (where possible)

- Access to any computer systems needed (e.g., electronic records) and to hard copies of records, in case electronic access is compromised
- Have all the important information on hand at the time of the call. This could include, but is not limited to:
 - Up-to-date case information or files, including the history of child protection or safety concerns for the child
 - Client phone numbers (keep multiple phone numbers and WhatsApp numbers on file, in case the primary contact line is not working)
 - Contact details for local service providers, including helplines and details about local hospital emergency departments
 - Case management standard operating procedures (SOPs) and referral pathways
- If an interpreter is required, make sure you contact them well enough in advance to ensure that they are available and familiar with all the confidentiality protocols. Test the modalities through which you will be contacting your client.
- The length and structure of traditional face-to-face sessions will need to be altered for phone delivery. It may be difficult for some children to continue paying attention over the phone for long periods. For this reason, shorter, but more frequent sessions are often more manageable than one hour-long sessions. The time and length of the calls/sessions should be established on a case-by-case basis.
- Before you call, prepare a list of questions that you would like to ask, but do not turn the call into an interrogation. If it is not your first time talking to a child or family,

	<p>quickly go over your notes from your last contact with them, so you are reminded of what you were talking about. This will make your phone call part of a continuum of support. For example, <i>“The last time we spoke, you said you were going to do X. How has that worked out?”</i></p> <ul style="list-style-type: none"> • Be prepared to answer basic COVID-related questions, including questions on government policies and restrictions such as curfews, physical distancing, quarantining, hand-washing, etc. Seek guidance from health officials on common symptoms and how to get medical assistance. If you are not confident that you can answer the client’s questions, connect the person with someone who can help or try to get the information that is needed and call back. • Know how to contact your supervisor for support and assistance, particularly for urgent risk issues.
<p>Preparation Required</p> 	<p>Preparation required for face-to-face training:</p> <ul style="list-style-type: none"> • Obtain stationery and coloring materials <p>Preparation required for remotely facilitated training:</p> <ul style="list-style-type: none"> • Ask participants to get some stationery and coloring materials from own stock
<p>Related Materials & Supporting Information</p> 	<p>Not applicable for this session.</p>

Time	Facilitator Notes	Producer Notes (remote delivery)	Screen/ Resource
5 min.	<p>Introduction</p> <p>Welcome the participants to the session and share the session aim and objectives.</p>		PPT slide 13
40 min.	<p>Say: <i>“We have now distributed a lot of coloring materials and stationery. I would like to ask you all to use your imagination to represent — through a drawing or model — the ideal setting, preparation, and materials required for a case management call. We will allow you 15 minutes to work on this individually before asking for some volunteers to present their drawings or models.”</i></p> <p>Say: <i>“Would anyone like to present and describe their preparatory work and ideal setting for a case management call?”</i></p> <p>Instructions: Allow 2 to 4 volunteers to present their drawings and/or models.</p> <p>Say: <i>“Any additional considerations?”</i></p> <p>Instructions: Take any additional points suggested by the participants and complement information provided in the key learning points section above (also on slide PPT 15).</p> <p>Say: <i>“Before the call, you also need to consider the following:”</i></p> <ul style="list-style-type: none"> <i>“If an interpreter is required, make sure you contact them well enough in advance to ensure that they are available and familiar with all confidentiality protocols. Test the modalities through which you will be contacting your client.”</i> 	<p>Instructions: Ask participants to draw on their own and to share a picture through the chat function.</p> <p>Ask a few volunteers to explain their drawings or models.</p> <p>Then ask the rest of the participants if they have any other considerations to suggest, in addition to what has already been presented.</p> <p>Take any additional points suggested by the participants and complement information provided in the support information section below.</p>	<p>PPT slide 14</p> <p>PPT slide 15</p>

- *“The length and structure of traditional face-to-face sessions will need to be altered for phone delivery. For instance, it may be difficult for some children to continue paying attention over the phone for long periods. So, shorter, but more frequent sessions are often more manageable than one hour-long sessions. The time and length of the calls or sessions should be established on a case-by-case basis.”*
- *“Before you call a child or family, quickly go over your notes from your last contact with them, so you are reminded of what you were talking about. This will make your phone call part of a continuum of support. For example, ‘The last time we spoke, you said you were going to do X. How has that worked out?’”*
- *“Be prepared to answer basic COVID-related questions, including questions on government policies and restrictions such as curfews, physical distancing, quarantining, hand-washing, etc. Seek guidance from health officials on common symptoms and how to get medical assistance. If you are not confident that you can answer the client’s questions, connect the person with someone who can help or try to get the information that is needed and call back.”*
- *“Know how to contact your supervisor for support and assistance, particularly for urgent risk issues.”*



The Case Management Call

SESSION PLAN:

Session Length 	65 minutes
Aim and Learning Outcomes 	<p>The aim of the session is to explore key aspects of appropriately handling case management calls, from the beginning till the end.</p> <p>By the end of the session, participants will be able to</p> <ul style="list-style-type: none">• Describe the key aspects of handling a case management call, from the beginning till the end.
Key Learning Points 	Call Opening <ul style="list-style-type: none">• Introduce yourself by name and agency, so that the person can feel confident about who is calling and be certain that you have dialed the correct number.• To be sure that you are speaking to the correct child/caregiver, you can confirm the name of the parent, caregiver, or another trusted adult, and of the child, and ask them to confirm details such as part of their address or their date of birth.• In the majority of cases, you will be in contact with a caregiver first. If this is the case, once you have set up trust with the caregiver ask if you can speak to the child.• Collaboratively agree on what to do if you lose connection or if a call is interrupted because the place is no longer safe for the call. For instance, if the connection is lost, try calling back at 5-minute intervals up to 5 times; if it is no longer safe, call back at the same time the next day.

- Check if it is safe for the child, caregiver, or trusted adult to be speaking to you.
- Sometimes children, caregivers, or other trusted adults may have a lot to say because they are upset or anxious or have been waiting for you to call. Let them speak, and try not to interrupt with too many questions. The opposite may also be true. Children and caregivers may be reluctant to talk, and we should respect their silence. In these cases, use soft questions to build rapport and invite them to share and talk.

Throughout the Call

- Use all of your active listening skills. Do not be afraid of silences — people may need time to answer questions or process their thoughts, especially when they cannot see you.
- If possible, ask the child/caregiver to enable the video feature. This is particularly important with younger children or those with disabilities, who may find it easier to connect with someone they can see.
- Try to avoid sounding as if you are reading from a list of prepared questions. You want a conversation, not an interrogation!
- Remember that not all children (or adults) have names for their emotions. In some instances, you could use a rating exercise in some instances by asking the child/caregiver how they are feeling on a scale from 0 to 5, where 0 is very sad and 5 is very happy. People can also have contradictory feelings, which can lead to confusion, sadness, and anger. Empathic listening, without jumping to conclusions or making assumptions, can help the person to process their feelings and structure their thoughts.
- A very important component of gaining the trust of a child, caregiver, or trusted adult is to build your credibility. This is particularly important when working by phone. Review what has been said on the phone to confirm that you got it right, and only

	<p>make commitments that you can follow through with.</p> <p>Before the Call Ends</p> <ul style="list-style-type: none"> • If a life-threatening situation (e.g., abuse or suicide risk) is disclosed by phone, get verbal consent through a voice message or text, to take immediate action. If you are not able to get consent from the child, caregiver, or trusted adult, you should discuss the situation immediately after the call with your supervisor to determine what actions to take. • Before ending the call, clarify to the child, caregiver, or trusted adult what will happen next. Check how and when would be the best options for contacting them in the future. • Clarify the situations in which you could conduct a face-to-face visit, and what specific arrangements have to be made before a face-to-face visit can take place. • Ensure that the child, caregiver, or trusted adult has a way to contact you when needed.
<p>Preparation Required</p> 	<p>Preparation required for face-to-face training: Not applicable to this session.</p> <p>Preparation required for remotely facilitated training:</p> <ul style="list-style-type: none"> • Set up breakout rooms and whiteboards with a question generated at the beginning of the training.
<p>Related Materials & Supporting Information</p> 	<p>Not applicable for this session.</p>

Time	Facilitator Notes	Producer Notes	Screen/ Resource
5 min.	<p>Introduction</p> <p>Welcome the participants to the session and share the session aim and objectives.</p>		PPT slide 16
40 min.	<p>Say: <i>“We are now going to watch the video that we proposed for your pre-training assignment. While watching the video, I would like you all to work in groups and note key approaches used by the caseworker during one of the three phases of the call:</i></p> <ul style="list-style-type: none"> • <i>In the opening of the call</i> • <i>During and throughout the call</i> • <i>Ending the call</i> <p><i>“Group 1 will work on the opening, group 2 during and throughout the call and group 3 on the ending.”</i></p> <p>Instructions: Divide participants into 3 groups, and assign each group 1 of the 3 phases of the call. Play the video. After the video is over, allow 10 minutes for discussion.</p> <p>Say: <i>“Group 1, please present the key aspects to keep in mind at the start of the call.”</i></p> <p>Instructions: Once group 1 has presented, ask if anyone else would like to add further information or insights. Make sure that you integrate the answers provided into the key learning points section.</p> <p>Say: <i>“Group 2, please present the key aspects to keep in mind throughout the call.”</i></p>	<p>Preparation: Set up 3 breakout rooms. Each breakout room is associated with a different phase of the case management call with a whiteboard showing one of the following labels:</p> <ul style="list-style-type: none"> • Call opening • During and throughout the call • Ending the call <p>Instructions: Divide participants into 3 groups, and assign each group one of the 3 phases of the call. Play the video. After the video is over, allow 15 minutes for discussion.</p> <p>Back in plenary ask each group to present the key features of the call phase they focused on. After each group’s presentation, ask the other participants to contribute information or thoughts of their own. Make sure to integrate the answers into the key learning points section.</p>	PPT slide 17

Instructions: Once group 2 has presented, ask if anyone else would like to add further information or insights. Make sure that you integrate the answers provided into the key learning points section.

Say: *“Group 3, please present the key aspects to keep in mind at the end of the call.”*

Instructions: Once group 3 has presented, ask if anyone else would like to add further information or insights. Make sure that you integrate the answers provided into the key learning points section.

Say: *“After the call ends, complete the records as required by your agency, and make any referrals or follow-up calls. If you are working remotely, you will need to find a way to keep case documentation secure, so it cannot be accessed, even accidentally, by anyone else. This applies to both electronic documents, for which password encryption is recommended, and to paper copies, which should be locked in a cabinet.*

“Make sure that details concerning the identity of the child, caregiver, or trusted adult are not included in any document. This is to protect your clients’ identities. If you have been distressed or overwhelmed by the call, seek support from your supervisor, ideally before making or taking another call.”

<p>20 min.</p>	<p>Wrap-up</p> <p>Say: “It would be great to hear from you about your key learnings from the first day of training. Have any questions on the flipchart now been answered?”</p> <p>Instructions: Take inputs from the participants, and remove the already-answered questions from the flipchart.</p> <p>Say: <i>“Have you got any burning questions?”</i></p> <p>Instructions: Answer the remaining questions. Thank the participants, and inform them about the schedule of the session to be held on the next day.</p>	<p>Instructions: Show whiteboard with the questions generated at the beginning of the training, and remove questions that have been answered.</p>	<p>PPT Slide 18</p>
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Managing Difficult Calls

SESSION PLAN:

SESSION PLAN:	
Session Length	55 minutes
Aim and Learning Outcomes 	<p>The aim of the session is to familiarize participants with handling difficult case management calls in a safe environment.</p> <p>By the end of the session, participants will be able to</p> <ul style="list-style-type: none">List top tips on how to handle difficult case management calls
Key Learning Points 	<p>See below for notes on how to handle distressed and/or angry calls.</p> <p>Silent Calls</p> <p>If you receive a silent call from a new number that you cannot identify, remember that the silence may indicate that someone is trying to track the call, so be careful not to share too much information about the service over the phone. Some helpful things to say during a silent call include:</p> <ul style="list-style-type: none"><i>“I know it can be difficult to find words to talk about what is happening. Take your time. I am here to listen to you if you want to talk to me.”</i><i>“I know that it can be difficult to find words to talk about what is happening. I just want to let you know that I will not share any personal information.”</i><i>“I know that it can be difficult to talk about what is happening, so if you don’t feel like talking right now, you can call me back at any time.”</i> <p>There is a fine line between a silent call being supportive and moving into a space where it no longer feels supportive. If it is the latter, you can gently end the call by saying something like, <i>“Just to remind you that we are here to listen and support you whenever</i></p>

	<p><i>you feel ready to talk. For now, I am going to end this call, but please know that we are here to support you with our services.”</i> Pause in case the caller chooses to speak; if they don’t, then hang up. This approach will allow you to end the call knowing that the caller felt supported and listened to, and was provided the option of calling back.</p> <p>Long Calls</p> <p>Ending a call that has lasted for too long is important, as it will become an unsupportive call if we allow it to continue without a focus. We can end these calls in a respectful manner, while still communicating that the service is available to the child/caregiver at another time. Some helpful phrases to end a call include:</p> <ul style="list-style-type: none"> • <i>“We’ve talked about a lot during this call. How are you feeling now?”</i> • <i>“We’ve talked about a lot during this call. Have I answered all of your questions?”</i> • <i>“Perhaps you would like to take some time to think about all that we have talked about today, and then we can talk more the next time we speak.”</i> • <i>“We have spoken a lot today, and you have a lot to think about. When are we next going to speak?”</i> • <i>“What are you going to do when we finish talking?”</i>
<p>Preparation Required</p> 	<p>Preparation required for face-to-face training: Not applicable for this session.</p> <p>Preparation required for remotely facilitated training:</p> <ul style="list-style-type: none"> • Set up breakout rooms and whiteboards
<p>Related Materials & Supporting Information</p> 	<p>Not applicable for this session.</p>

Tips to handle distressed and/or angry calls:

Distressed Call	Angry Call
Do not panic — you have got this.	Do not panic — you have got this.
Take deep breaths, be aware of your breathing and ground yourself, feet on the floor.	Take deep breaths, be aware of your breathing and ground yourself, feet on the floor.
<p>Slow things down for the child/caregiver, and for yourself</p> <p><i>“I can hear how upsetting this is for you. Take your time.”</i></p> <p>Or:</p> <p><i>“I can hear how upset you are. Take your time.”</i></p> <p>And:</p> <p><i>“I am here to support you.”</i></p>	<p>Listen to the child/caregiver and try to establish why they feel angry. Remember that their anger is not directed at you or caused by you. It is likely due to their situation and experiences. Let them have their outburst of anger, and listen to them, using small verbal cues such as <i>“I see”</i> and <i>“uh huh”</i> etc. to let them know you are listening.</p>
<p>Be aware of the child/caregiver’s breathing, especially if it is short and panicked. If that is the case, note this down. Then, support them to take a few slow, deep breaths (e.g., <i>“I can hear how upset you are right now. Let’s take a few slow, deep breaths, and then we can continue”</i>).</p>	<p>Acknowledge their anger by using identifying statements such as <i>“I can hear that you feel angry about…”</i> and <i>“I can understand why you feel so angry.”</i></p>
<p>Use active listening, allowing the child/caregiver to pour out their emotions. Respond with simple verbal cues such as <i>“Uh huh,” “I see,”</i> and <i>“mmhmm”</i> to allow them to know that you are listening.</p>	<p>If a child’s or caregiver’s anger does not dissipate, but is instead directed at you, making the call difficult, you might have to gently and respectfully end the call. Try to make another call or text message the child later on, to check on whether communication is possible. Failing these attempts, you could also check on their well-being with the support of someone else who is trusted by the child.</p>

<p>Tell the child/caregiver that you can hear how upset they are, and that you understand them. This can validate their feelings.</p>	<p>If the anger of the child/caregiver does not dissipate, or is directed at you, this will make the call difficult. In this case, you should gently and respectfully end the call. Try to call or text message the child/caregiver later on to check on whether communication may be possible. Failing this, you could attempt to reach out through a trusted community member.</p>
<p>Do not ask too many questions, as this may give the impression that you are challenging the person in distress, and may worsen their distress.</p>	<p>Do not ask too many questions, as this may give the impression that you are challenging the angry person, and may worsen the situation.</p>
<p>When things have calmed down a little, try to establish the cause of the distress. For instance, you could say, <i>“I can hear how upset you are. Tell me what happened.”</i></p>	<p>When things have calmed down a little, try to establish the cause of the anger. For instance, you could say, <i>“I can hear how upset you are, tell me what has happened?”</i></p>
<p>Stay on the line until they calm down.</p>	<p>Stay on the line until they calm down.</p>

Time	Facilitator Notes	Producer Notes	Screen/ Resource
5 min.	<p>Introduction</p> <p>Welcome the participants to the session and recap the topics covered during Day 1. Share the plan for today, as well as the session aim and objectives.</p>		PPT slides 19 and 20
50 min.	<p>Practice in handling distressed and angry calls</p> <p>Say: <i>“In our job as caseworkers, we might come across difficult emotions that are hard to handle in a face-to-face setting, and even harder over the phone. You might come across children/caregivers who are very distressed, and this can be challenging. A distressed caller may be very upset, audibly crying, and sounding panicked, or they may sound confused, incoherent, and hard to understand. You also may also come across angry children/caregivers, and this situation can be particularly difficult to manage; but with practice, you will know how to be supportive.</i></p> <p><i>“Let’s talk about this. You will be divided into groups of 4 or 5 participants. Some groups will focus on how to handle calls with children/caregivers in distress, while other groups will focus on how to handle calls with children/caregivers who are angry or aggressive. You will have 20 minutes for your group discussions.”</i></p> <p>Instructions: Monitor the time and guide the discussions within the groups.</p>	<p>Preparation: Set up the breakout rooms to accommodate 4 or 5 participants and the necessary whiteboards. Divide the participants into groups that will either focus on how to handle calls with children/caregivers in distress or on how to handle calls with children/caregivers who are angry or aggressive. Allow 20 minutes for the discussions.</p>	PPT slide 21

Say: *“Keeping calm is fundamental to the management of challenging calls as well as never shouting. Ensure that you make use of your active listening skills. As you cannot see the other person’s facial expressions or body language when speaking with them on the phone, you must rely on auditory cues, such as the other person’s tone of voice or the lengths of their pauses. When your client’s tone or cadence changes, you might ask something like, “Is it okay for us to continue?” or “Is this still a good time to talk?” Let’s review the top tips that I have listed, and see if there is anything you would like to add based on your group discussions.”*

Instructions: Present the slide with the top tips adapted from “Gender-Based Violence Area of Responsibility (GBV AoR) Strategy 2020 and “COVID-19 Guidance on Remote GBV Services Focusing on Phone-based Case Management and Hotlines.” See:

<https://gbvaor.net/sites/default/files/2019-07/GBV%20AoR%20Strategy%202018-2020%20P3.pdf>

<https://gbvaor.net/sites/default/files/2021-01/covid-guidance-on-remote-gbv-services-04012021.pdf>

Ask the participants if they have come up with any additional suggestions based on their group discussions.

Say: *“The list of tips you have just seen clearly present a simplified view of reality. For instance, you may have callers who are both*

PPT slides
22 and 23

PPT slide
24

distressed and angry. You might also have other types of challenging calls, such as silent calls or very long calls. Should you receive a silent call from a new number that you cannot identify, remember that the silence may be from someone who is trying to track the call, so be careful not to share too much information about the service over the phone.”

Instructions: Present slide 24, which is also adapted from “GBV AoR 2020” and “COVID-19 Guidance on Remote GBV Services Focusing on Phone-based Case Management and Hotlines.”

Say: *“If a call is getting too long, and you feel as if it is going around in circles, returning to topics that were already covered, you can use some of these sentences to gently hint that further discussion should take place during a future call.”*

Instructions: Present slide 25. which is also adapted from: GBV AOR, 2020, and “COVID-19 Guidance on Remote GBV Services Focusing on Phone-based Case Management and Hotlines.”

Say: *“The range of difficult calls varies as much as the cases themselves. Refining your phone skills will require practice and experience. As suggested in other sessions of this training, if you experience a difficult call or a call during which you think the safety of the child/caregiver is at risk, do speak with your line manager or supervisor how best to respond.”*

PPT slide
25



Practice Intake Calls

SESSION PLAN:

Session Length 	155 minutes
Aim and Learning Outcomes 	<p>Session Aim: The aim is to practice handling case management calls in a safe environment.</p> <p>By the end of the session, participants will be able to</p> <ul style="list-style-type: none">• Demonstrate how to conduct case-management intake calls in a safe manner
Key Learning Points 	Not applicable for this session/identified by the participants on an individual basis.
Preparation Required 	<p>Preparation required for face-to-face training:</p> <ul style="list-style-type: none">• Prepare scenarios for participant role-playing <p>Preparation required for remotely facilitated training:</p> <ul style="list-style-type: none">• Prepare scenarios for participant role-playing
Related Materials & Supporting Information 	Not applicable for this session.

Time	Facilitator Notes	Producer Notes	Screen/ Resource
5 min.	<p>Introduction</p> <p>Welcome the participants to the session and share the session aim and objectives.</p>		PPT slide 26
110 min.	<p>Case-management call role-plays</p> <p>Say: <i>“We are now going to work in groups of 3. Let’s form these groups.”</i></p> <p>Instructions: Divide the participants into groups as you deem appropriate.</p> <p>Say: <i>“We are now going to practice handling a case management intake call. In your groups, you will take turns playing the caseworker; the observer; or the client, that is to say, the child or caregiver. We will have 3 role-plays, giving everyone the chance to practice each role. We are going to really ask you to call your counterpart on the phone, so I would like to ask each group to please create its own WhatsApp or Signal group.”</i></p> <p>Instructions: Once the participants have set up their WhatsApp or Signal groups, distribute handouts with the description of the first scenario, and assign the three roles within each group.</p> <p>Say: <i>“Take 10 minutes to read through the scenario and to skim once again the “Case Management Steps via Phone Tip Sheet.” The observers can refresh their memory on how to provide constructive feedback by reviewing the instructions provided on the observer card.”</i></p> <p>Instructions: After participants have read through the scenario, skimmed the “Case Management Steps via Phone</p>	<p>Instructions: This exercise requires the same preparation and explanations as for the face-to-face version:</p> <ul style="list-style-type: none"> • Set up WhatsApp or Signal group • Call for 20 minutes. • Devote 10 minutes to feedback. <p>The observers will also have to also play a timekeeper role by stopping the call at 20 minutes, ensuring that feedback is provided during the following 10 minutes. The facilitator will send timekeeping reminders over the main platform used. After feedback is given, the observer in each group should encourage everyone’s return to plenary. The facilitator should then address any challenges experienced by the participants before sending them the description of the next scenario.</p>	PPT Slide 27

Tip Sheet,” and (in the case of the observers) reviewed the instructions on the observer card, ask if there are any questions and respond to them.

Say: *“The participants who will play the clients, please move to room B. The observers and caseworkers will stay in the main hall. Once the clients are in room B, the caseworkers should call them.”*

Instructions: Allow about 20 minutes for the call to take place, then ask everyone to stop. Facilitate the return to the main hall of the participants who played the child/caregiver.

Say: *Thinking of the opening, the unfolding of the call and its closure, I would like the observers, the clients, and then the caseworkers all to share one thing they thought worked well during the call and one thing they think could be improved. Case Workers are encouraged to make a note of the feedback received and to engage in self-reflection.”*

Instructions: Allow enough time for the feedback to be given (about 10 minutes), then distribute handouts with the description of the second scenario. Allow a few minutes for the participants to read through it.

Say: *“The participants who will play the clients please move to room B. The observers and caseworkers will stay in the main hall. Once the clients are in room B, the caseworkers should call them.”*

Instructions: Allow about 20 minutes for the call, and then ask everyone to stop. Facilitate the return to the main

hall of the participants who played the child/caregiver.

Say: *“Well done, everyone. As we did with the previous scenario thinking of the opening of the call, the unfolding of the call and its closure, I would like the observers, the clients, and then the caseworkers all share to one thing they thought worked well during the call and one thing they think could be improved. The caseworkers are encouraged to make a note of the feedback and to engage in self-reflection.”*

Instructions: Allow enough time for the feedback to be given (about 10 minutes), and then distribute handouts with the description of the final scenario. Allow a few minutes for the participants to read through it.

Say: *“The participants who will play the clients please move to room B. The observers and caseworkers will stay in the main hall. Once the clients are in room B, the caseworkers should call them.”*

Instructions: Allow about 20 minutes for the call, and then ask everyone to stop. Facilitate the return to the main hall of the participants who played the child/caregiver.

Say: *“Well done, everyone. As we did with the previous scenarios, thinking of the opening of the call, the unfolding of the call and its closure, I would like the observers, the clients, and then the caseworkers all to share one thing they thought worked well during the call and one thing they think could be improved. The caseworkers are encouraged to make a note of the feedback and to engage in self-reflection.”*

40 min.

Review of the challenges of the phone calls

Say: *“Well done, everyone. Now that we are all together, let’s all discuss the following two questions:*

- *What was the most challenging aspect of the calls?*
- *Did anything about the calls make you feel uncomfortable?”*

Instructions: Listen to the answers to each question in turn, providing what immediate responses you can.

Say: *“Let’s recall what was important in each phase of the call:*

- *Opening*
- *During*
- *Ending*

Instructions: Put 3 flipcharts up and discuss with the participants the key learnings regarding the three phases of the call.

Say: *“I would like to leave 10 additional minutes for all of you to reflect and write down a few major tips for yourself, so that you can remember them when making calls in the future. It would be a good idea to consider what you need to do at the start of the call, during the call, and at the end of the call.”*

Instructions: Allow 10 minutes for the participants to write down their tips. Then provide a recap of the session.

Instructions: Set up 3 whiteboards for the plenary discussion.

PPT slide 28



Practice Safety Planning

SESSION PLAN:

<p>Session Length</p> 	<p>45 minutes</p>
<p>Aim and Learning Outcomes</p> 	<p>Session Aim: To refresh the participants' knowledge of safety planning considerations.</p> <p>By the end of the session, participants will be able to</p> <ul style="list-style-type: none">• Discuss key considerations regarding safety planning
<p>Key learning points</p> 	<ul style="list-style-type: none">• Safety planning is about trying to make a potentially dangerous situation less dangerous. It is also about helping children/caregivers recognize their strengths and resources.• Given the challenges associated with safety planning, it is very important that caseworkers work with their supervisors to troubleshoot issues, particularly for cases where the risk is moderate to high.• If a child/caregiver appears to be in active crisis (e.g., if they are very upset, exhibit out-of-control behavior, or appear to be in danger), caseworkers should take the following steps:<ul style="list-style-type: none">- Stay calm and reassure the child/caregiver that it was good to share their concerns, and that you want to help them.- Explain to the child/caregiver that you would like to talk with your supervisor immediately. You should try to speak with your supervisor while the client is still on the phone.

	<p>Decide, or agree on a plan before the phone call is over.</p> <ul style="list-style-type: none"> - If you cannot get in touch with your supervisor, and there is no one available to remain with the child/caregiver, you should arrange for the client to be referred immediately to a safe and supervised place until you can contact your supervisor.
<p>Preparation Required</p> 	<p>Preparation required for face-to-face training:</p> <ul style="list-style-type: none"> • Prepare handouts explaining the scenarios. <p>Preparation required for remotely facilitated training:</p> <ul style="list-style-type: none"> • Prepare descriptions of the scenarios.
<p>Related Materials & Supporting Information</p> 	<p>Not applicable for this session.</p>

Time	Facilitator Notes	Producer Notes	Screen/Resource
5 min.	<p>Introduction</p> <p>Welcome the participants to the session and share the session aim and objectives.</p>		PPT Slide 29
40 min.	<p>Review of safety planning</p> <p>Say: <i>“Please reread the 3 scenarios that you enacted during the intake practice calls. You will then be divided into groups of 4 or 5 participants. During the next 20 minutes, each group is to discuss the following themes:</i></p> <ul style="list-style-type: none"> • <i>Was there a need to develop a safety plan for Ali, Lila, or Amina because of the risks and hazards they may be exposed to?</i> • <i>If yes, which child was experiencing which</i> 	<p>Instructions: Set up whiteboards for group discussions and annotation.</p>	PPT Slide 30

risks and hazards.

- *For children needing a safety plan, please list on the flipchart:*
 - *Actions to decrease risks*
 - *Actions to take in risky situations*

“During the discussion, think of the context of COVID-19 and other IDOs. You will then be asked to present back to plenary the discussion you have had

Instructions: Allow 5 minutes for each group to present.

Say: *“If a child or caregiver appears to be experiencing a serious crisis — for instance, if they are very upset, exhibit out-of-control behavior, or appear to be in danger — as the caseworker, you should take the following steps:*

- *Stay calm and reassure the client that it was good to share their concerns, and that you want to help them.*
- *Explain to the client that you would like to talk with your supervisor immediately. You should try to speak with your supervisor while the client is still on the phone. Decide, or agree on a plan with the client before the phone call is over.*
- *If you cannot get in touch with your supervisor, and there is no one available to remain with the client, you should arrange for the client to be referred immediately to a safe and supervised place until you can contact your supervisor.*

“You can also read more on safety planning here: [COVID-19 Guidance on Remote GBV Services Focusing on Phone-based Case Management and Hotlines](#). See Section IV: Safety Planning and Other Support to High-Risk Survivors.”



Evaluation and Close SESSION PLAN:

Session Length 	45 minutes
Aim and Learning Outcomes 	<p>The aim of the session is to collect participant feedback, recap key learning points, and close the course.</p> <p>By the end of the session, participants will be able to</p> <ul style="list-style-type: none">• Identify their key learnings from the course• Evaluate the course and provide feedback to the facilitators
Key Learning Points 	Not applicable, identified by the participants on an individual basis.
Preparation Required 	<p>Preparation required for face-to-face training:</p> <ul style="list-style-type: none">• Print a copy of the course evaluation form for each participant. <p>Preparation required for remotely facilitated training:</p> <ul style="list-style-type: none">• Prepare a link to the online course evaluation form

Related Materials & Supporting Information



Not applicable for this session.

Time	Facilitator Notes	Producer Notes	Screen/Resource
15 min.	<p>Course recap</p> <p>Instructions: Congratulate the participants on reaching the final session of the course, and briefly outline what will happen in this session.</p> <p>Explain that they will start with a recap of what they have learned during the course. Provide each participant with a sheet of paper and ask them to write a quiz question on it, based on the course content. Give them a couple of minutes to do this, and then have them fold their sheets into a paper airplane.</p> <p>Ask half the group to stand at each end of the training room. Tell the participants in one group to launch their paper planes toward their colleagues at the other end of the room. Each participant at the other end should pick up the plane that lands nearest to them, and take it in turns to read out and answer the question written on it.</p> <p>Invite others to input if anyone gets stuck.</p>	<p>Instructions: For the remote version of the recap exercise, ask each participant to think of a quiz question based on the course content, and write it down. Then ask each participant to find one random object from the room they are in. You should find an object in your location, as well.</p> <p>Next, hold up your object and ask the participants if anyone among them has found a similar or related object. The participant that responds should then read out their quiz question.</p> <p>Whoever answers correctly should then read out their question, and so on, until all the questions have been answered. Try to ensure that all participants answer at least one question.</p>	

	Repeat the process, with the other group launching their “airplanes,” until all the questions have been answered.		
10 min.	<p>Evaluation forms</p> <p>Hand out the evaluation forms or provide a link to the form, and ask the participants to spend a few minutes providing feedback on the course. Remind them that the completed forms will be really useful, as they will help ensure that the course is effective and will continue to improve.</p>	Share the link to the online evaluation form.	
10 min.	<p>Closing remarks</p> <p>Say: <i>“Today we have covered the handling of difficult conversations. We have practiced case management intake calls and done a refresher on safety planning. We know that, in real life, it is going to be a lot more difficult than this, but we hope that this short training will at least make you better prepared. I am happy to take any questions you may have now. I will also look at the remaining questions on the flipchart.”</i></p> <p>Instruction: Answer questions from the participants, and remove the answered questions from the flipchart. If any questions are left, inform the participants</p>	Share links to any contacts or resources in the chat.	<p>PPT slide 31</p> <p>PPT slide 32</p>

that you will be getting back to them with relevant information and materials.

Say: *“For the completion of the training, you are invited to join 2 peer-to-peer coaching sessions, which will take place 2 weeks and 4 weeks from today. The sessions will be organized on [include selected platform], and will last approximately 2 hours each. All instructions for joining will be shared via email. Before the first call we would like you to share a difficult or challenging case you have had to handle over the phone.*

“We really would like to continue this journey with you, so that you are supported while delivering case management via phone. These coaching sessions will provide you with an opportunity to further brainstorm and learn together. Thank you, and we look forward to these online catch-ups.”

Post-Training Peer-to-Peer Coaching Sessions

Instructions

Invite the participants to join 2 peer-to-peer online coaching sessions, one of them 2 weeks and the other 4 weeks after the training. The calls will take place on [include selected platform] and will last 90 to 120 minutes. Propose different time slots and agree on the most suitable one with the group.

1st call

Before the call

Invite each participant to share a case that was challenging to handle over the phone, especially with respect to following confidentiality protocols. Having an idea of the types of cases that will be discussed will allow you to be prepared with questions to ask or suggestions to make. When you reply to the participants, acknowledge the receipt of the cases shared. Then ask the participants to come prepared to discuss the following questions:

- What was most challenging about handling the presented cases?
- What actions did the participants take to mitigate those challenges?

On the call

- Welcome all the participants.
- Use an energizer to get everyone engaged in the session, (i.e. ask all to show an object that is dear to them).
- **Say:** *“This is a safe space for sharing and learning. We would like you to share your experiences and learn from one another. I will only be a moderator during the call. We are not going to discuss your hands-on experience in handling cases via phone during the last 2 weeks. But it would be great if you could share the challenging case that you have experienced at work, and how you handled it.”*
- After each participant has presented his or her case and described the actions taken to mitigate the challenges encountered, ask whether the other participants have any suggestions on how to handle the case.
- Allow all participants to share.
- Ask if there are any questions or anything else the participants would like to talk about.
- **Say:** *“There will be another opportunity for us to come together in 2 weeks and further discuss your experiences. At that time, we will focus more on safety planning. You will need to come prepared to discuss the following:*
 - *What cases have required safety planning in your experience delivering case management services via phone in the context of COVID-19?*

- *What actions have you agreed to include in the safety plans?*
- *What type of challenges have you encountered in setting up safety plans in the context of case management via phone during the COVID-19 pandemic?"*
- Thank the participants for attending this session, and invite them to take a moment for themselves. They could simply go for a stroll, look up at the stars, spend some time reading, take a coffee break, etc.

2nd call

Before the call

Ahead of the call invite participants to think about safety planning for cases they have been handling over the phone. Ask them to come prepared to discuss the following questions:

- What cases have required safety planning in your experience delivering case management services via phone in the context of COVID-19?
- What actions have you agreed to include in the safety plans?
- What types of challenges have you encountered in setting up safety plans for case management via phone in the context of COVID-19?
- Was there something that worked really well in a specific case?

On the call

- Welcome all the participants.
- To get the participants more engaged, ask them what acts of kindness they have done for themselves.
- **Say:** *"Again, I would like to stress that this is a safe space for sharing and learning. We would like you to share your experiences and learn from one another. I will only be a moderator during the call. Today we are going to talk about your experiences with safety planning in the context of COVID-19."*
- Ask for volunteers to come forward and share own experiences in turn.
- After every presentation, ask whether others in the group have anything to add.
- Allow all the participants to contribute.
- Ask if there are any questions.
- **Say:** *"Thank you all for your participation in this training. I hope you have enjoyed the experience. Please remember that, alongside your line manager or supervisor, you are valuable resources for each other, as you have demonstrated throughout this experience together. We now have 2 whiteboards set up. The first one is for leaving an evaluation of these sessions, so we can learn if they were useful to you. The second one is for leaving a word of encouragement for the rest of the group in undertaking your work via phone."*
- Thank the participants for attending this session.
- Share the whiteboard suggestions in PDF format with the participants.

Additional References:

- [Technical Note: Adaptation of Child Protection Case Management to the COVID-19 Pandemic V3](#)
- [COVID-19 Guidance on Remote GBV Services Focusing on Phone-based Case Management and Hotlines](#)
- [Guidelines for Mobile and Remote Gender-Based Violence \(GBV\) Service Delivery](#)
- [Remote Child Protection Services: Ensuring Safety](#)