Home Thrive Scale™ - Case Management Tool towards Preventing Family Separation and Ensuring Children Thrive in Family-Based and Alternative Care Options

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Abstract
Case management can be a complex process where multiple factors must be considered for the safety and wellbeing of a child in any care option. Miracle Foundation's proprietary Home Thrive Scale ™ is a strengths-based assessment tool that makes it easier to identify strengths, risks, and address areas of support within a family home over time. A home's safety is measured based on five wellbeing domains - Family and Social Relations, Health and Mental Health, Education, Living Conditions, and Household Economy - with the child and family's thoughts at the core. Intervention options are then offered to put assessments into action. The tool serves to both prevent family breakdowns, and reintegrate children from institutions back into families (or other family-based or alternative care options).
Here, we provide an overview of the tool, including its purpose, setup, and functionality within a case management system. The use of the tool is illustrated with the COVID-19 situation in India where masses of children were rapidly placed from institutions back into families without preparation.

The Home Thrive Scale™ is offered as a simple, actionable tool for anyone to use towards data-driven decisions for reintegration and prevention, available on paper or online.

Keywords: case management, family-based and alternative care, India, orphan and vulnerable children, family strengthening

Purpose

While many excellent theoretical guidelines exist on proper case management for keeping or reintegrating children into families, there is a gap in practical, comprehensive tools for caseworkers in the field to put these guidelines into practice. The following issues are often observed:

- Determining the appropriateness of a family situation or other reintegration option can be highly subjective and dependent upon a multitude of factors, making it a difficult task for caseworkers
- Existing tools often focus on assessment without plans for action, and lack specific follow-up on a child/family's progress over time
- Relevant information is fragmented across various types of documentation (field notes, reports, government paperwork, etc.), leading to an incomplete picture of a child and family's well being
- Child and family's voices are overlooked

The paper will delve into how Miracle Foundation's Home Thrive Scale™ addresses these gaps by offering a single tool that is:

- Codified to take the guesswork out of care and case management
- Quantifiable for data-driven decision making
- Holistic and strength-based
- Grounded in international standards and existing evidence
- Actionable
- Long-term
- Child- and family-centred

Intended Users

The tool is designed to be used by caseworkers who work directly with children and families through government, private, or NGO agencies.

It can be used towards preventing family separation, deciding a child's reintegration option if they are currently in a child care institution (CCI), and for post-reintegration follow up. Reintegration options include: child's biological family/family of origin, or other family-based alternative care such as kinship, foster care, adoption, small group homes, independent living.

Tool Development

The Home Thrive Scale™ is a rights-based tool addressing 24 of the 42 rights listed in the United Nations Convention on the Rights of the Child (1989)[i]. The UNCRC is the most complete statement of children's rights produced and is the most widely-ratified international human rights treaty in history.

This tool was developed after substantial research into child and family assessment tools used by numerous global organizations including USAID (Child Status Index), UK Department of Health, Save the Children, Hope and Homes for Children, Faith to Action, and Better Care Network.

Recognizing the critical nature of safety for the child, the Home Thrive Scale™ looks at safety in terms of the child, family, and community, and identifies Red Flag items that would prohibit reintegration until resolved.

The Home Thrive Scale™ assesses five "wellbeing domains" to determine the risk of family separation or the appropriateness of a reintegration option:

- *Family and Social Relationships* - Relationships between children and family members, contact with extended family members, and connection with the local community
- *Household Economy* - Caregiver's ability to provide shelter and basic needs through reliable income
- *Living Conditions* - Secure shelter with basic amenities such safe water and sleeping arrangements, and safe community environment
- *Education* - Children attending school, access to necessary supplies, and support for learning needs
- *Health and Mental Health* - Access to healthcare services for physical and mental health needs, children and family members observed to be healthy, special needs for children with disabilities are met

Format and Function

Assessment is typically done through an in-person visit to the home. Caseworkers are encouraged to approach children and families with warmth and openness to observe and support, instead of going in with a clipboard mentality.

Milestones and Scoring - Milestones under each wellbeing domain specify exactly what a caseworker should look for to gain a holistic understanding of a child's home situation. We use a strength-based approach by focusing on areas in which families are thriving and can be emphasized to keep them together, rather than looking only at safety factors that could separate them.

Each milestone is scored on a scale of 1-4 based on how much attention is needed:

- **In-Crisis (1):** Needs immediate attention - Concern is not addressed at all, requires urgent attention and intervention before child can be placed in the home
- **Vulnerable (2):** Needs attention, but not urgent - Resources have been identified but may be insufficient to fulfil concern
- **Safe (3):** Attention helpful, but not necessary - Concern is fully addressed but family may require occasional support to fulfil this concern

- **Thriving (4):** No attention needed - Concern is fully addressed and family is self-sufficient in fulfilling this concern without support

Red Flags - Milestones marked as Red Flags are urgent concerns related to the safety and wellbeing of a child such as abuse, child marriage, substance abuse, unsafe neighborhood, insecure employment of caregivers, children not going to school. Children are not recommended to stay in or return to situations where these milestones are rated In-Crisis.

Intervention Plans - For areas rated In-Crisis or Vulnerable, a checklist of recommended interventions is available to help create an action plan, which takes the guesswork out of what to do with the information gathered. Details of plans can then be recorded, along with updated progress on current interventions. This keeps a child's full case history in one place instead of scattered across multiple reports. Intervention plans, along with the rest of the case management process, are to be done *with* family members as active participants and not just *for* them.

Child and Family's Thoughts - Time must be taken to speak with the child and family members about their thoughts and feelings around reintegration. Space is provided to document these at each assessment, so the child and family's voices remain at the core of the entire process.

Status Summary - A Status Summary table tallies the scores and Red Flags in each domain. Scores are recorded for the initial, last, and current visits in order to compare progress over time. Ideally, scores should be moving away from In-Crisis towards Thriving as the family's needs are met (see Figure 1 for a sample of scores graphed out over time).

Analysis & Recommendations - A home is considered appropriate for a child if no Red Flag milestones rated as In-Crisis and if most of the other milestones are rated as Safe or Thriving. More frequent follow up can be recommended if there are urgent concerns.

Aside from Red Flags, milestones rated as In-Crisis or Vulnerable should not immediately disqualify a home if they can be addressed through interventions. No home is perfect, so families should have the opportunity to grow stronger with the right support. The child's thoughts, family's desire to stay together, and progress made on interventions must also be taken into account.

The Home Thrive Scale™ is only a *tool* to help caseworkers and families in the case management process; however, it is ultimately up to the people involved to use their judgement to determine whether a child should stay in their family or another suitable option. Therefore, there are no hard-set criteria for when a child should stay or not based on scores (aside from having zero Red Flags).

Similarly, the tool is only as effective as the information gathered by the caseworker and is no substitute for the soft skills required to work with families. Quality information comes from knowing what questions to ask and how, so as to get honest feedback (e.g. friendly tone, open-ended, non-leading questions, speaking to family members separately if needed, etc.). It also takes keen observation of how family members interact, including verbal and non-verbal

communication. A relationship of trust must be established with the child and family so that the caseworker is a member of their team to facilitate a reintegration in everyone's best interest.

Function within Case Management System

The Home Thrive Scale™ (hereto referred to as HTS) is at the heart of Miracle Foundation's child-centred case management system, which seeks to develop individualized care plans and sound decisions regarding reintegration through active collaboration with child and family at each step of the process.

The system consists of the following stages: Intake/Admission, Assessment, Planning, Implementation, Follow Up and Evaluation, and Case Closure (see Figure 2 for flowchart depicting all steps).

We will use the case of a child, Riya[ii] to walk through using the HTS in case management.

- *Intake/Admission* - Riya came into a CCI at seven years old after staying in an adoption agency for a few months. The CCI gathered what information they could about her family through the government-required case history with information from the adoption agency, but no family members could be reached.

- *Assessment* - While updating Riya's case history the next year, the CCI came to know about her mother and two siblings. Through a lot of searching and inquiry, they were able to reunite Riya with her family after a whole year apart.

  A baseline HTS assessment showed that Household Economy was at risk due to the mother's low income doing domestic housework (scored 64 per cent). Family & Social Relationships also scored low, likely from the long time Riya and her mother spent apart and having no other relatives present. While Education was not in danger, Riya needed some help with paying for school and focusing in the classroom.

- *Planning* - Since there were no Red Flags showing immediate safety concerns, planning began to reintegrate Riya with her family. The local government authority also recommended reintegration after seeing the child and family assessments. An intervention plan was set for Miracle to provide coaching support and school fees, and the CCI was able to connect Riya's family with a government grant program to supplement the mother's income.

- *Implementation* - Along with connecting Riya's family to resources for material support, the caseworker counselled Riya and her mother to prepare them emotionally for the transition back to living together. HTS was done one more time before Riya officially moved back to ensure that conditions were improved enough for her to return. Finally, Riya was able to move back home after the necessary government procedures were completed.

- *Follow-Up/Evaluate* - Riya was happy living with her family again, and her mother was able to work and care for her children (Family & Social Relationship score went from 50 per cent up to 75 per cent). However, when COVID-19 hit, Riya's mother lost her domestic housework job. Even after the lockdown relaxed and she got her job back, the income was not enough to feed and educate three children, and manage other expenses like rent and electricity. The drop in Household Economy score (down to 36 per cent) subsequently dragged the scores for Living Conditions, Education, and Health down as well (down by 25, 42, and 10 points, respectively).

  The caseworker counselled Riya's distraught mother and identified her strengths to come up with an intervention plan. Since the mother showed interest in stitching, the CCI helped enrol her into a local tailoring course and secured her with a sewing machine. With the right skills and tools in place, Riya's mother started her own at-home tailoring business. The caseworker continued to follow up with Riya and her family with encouragement and advice on financial management, using the HTS each time to map out the family's needs and how to intervene accordingly.

- *Close Case* - Riya's mother is more self-sufficient now and able to look after her children. After almost two years of follow up since Riya returned home, she and her family are settled and thriving in all wellbeing domains enough to close the case.

Online Functionality

The Home Thrive Scale™ is available for use on tablets, phones or computers - online and offline - via FormAssembly (an online survey tool) to make it easier to use on-the-go than paper copies. A mobile-first app is currently under development for improved user experience, data collection, and analysis.

In-Person vs. Remote

Much of assessing a child and family's situation relies on first-hand observation where non-verbal communications and interactions can be understood. Because of this, remote case management is not recommended (unless absolutely necessary, like a pandemic scenario) and the Home Thrive Scale™ is not designed for it. From our experience, collecting accurate information remotely is a challenge. Families may have limited access to phones, poor network connections, or limited time to talk due to work and other priorities. Phone conversations can also be more fatiguing than visits, so calls must be kept short and it may take multiple calls to get a full picture of the home situation. Using the tool with in-person visits is therefore recommended whenever possible.

Use and Implications

When COVID-19 hit India, hundreds of children from institutional care were immediately sent back to families with little to no preparation. This rapid reintegration drew serious concerns about children's safety given that they were being sent back to the very environments that were deemed unsafe for them to stay in the first place.

Despite their sudden nature, rapid reintegration also presented an opportunity for children to permanently return to a family environment, if reasonable to do so. The Home Thrive Scale™ allowed caseworkers to determine the safety of children sent home and whether permanent reintegration would be possible. Children with Red Flags marked were sent to stay with different family members if possible, or sent back to CCIs as a last resort if no other immediate solutions were available. Even if interventions to address problem areas were not immediately possible due to pandemic-related restrictions, such areas could at least be identified and plans could be made to act upon as soon as restrictions were safely lifted.

Out of 275 children from Miracle-partnered organizations who were sent back to families due to COVID-19, 180 (65 per cent) were able to permanently reintegrate with their families. The remaining children have returned, or are likely to return, to CCIs due to concerns including loss of caretakers' livelihood to provide for basic needs and cases of child abuse. Caseworkers will continue to work with these children and their families to improve the household situation such that it will be possible for the child to return at a later date, or find a more suitable reintegration option. Still, that a majority of children could safely stay with families shows great promise for how many children could stay in families given the right support, without needing institutional care.

Organizations and government agencies can use the data collected to understand what areas of support children and families generally need in order to allocate their resources accordingly. As per the most recent assessments, children reintegrated from Miracle-partnered institutions have HTS scores ranging from 52 to 88 per cent, with Household Economy and Living Conditions domains scoring lower and Health & Mental Health and Family & Social Relationships domains scoring higher. Understandably, the pandemic resulted in many caretakers losing their jobs; as we saw with Riya's case, this affects all aspects of a family's wellbeing. Livelihood support was therefore prioritized through direct cash transfers and linking families to government schemes to buffer the income loss so caretakers could get food and basic necessities as soon as possible. Mental health counselling continued remotely to ensure relationships continued to stay strong and families received critical psycho-social support to cope with trauma from rapid reintegration.

The Home Thrive Scale™ has been shared with district-level government agencies and child care institutions in 20 states, including four states (Maharashtra, Gujarat, Jharkhand, and Bihar) through a partnership with UNICEF. The goal is to get the tool into the hands of caseworkers throughout India -- and eventually globally -- to make the [iii]caseworker's job easier, improve quality of reintegrations, and improve quality of data for more informed decision making.

Feedback from the Field

Feedback from caseworkers within Miracle's partnering CCIs and government officials so far has been promising. Users find it easy to use and appreciate that all details relevant to a child's case can be managed through a single tool. Milestones are said to be clearly defined, thorough, and help escalate issues to address through the Red Flags so that caseworkers have exactly the information they need to understand a family's situation and plan interventions. The scoring summaries have also allowed caseworkers to get a snapshot of how families are doing and follow their progress over time. In this way, CCIs and government agencies are then able to track and visualize their impact on families, too.

Limitations

The version of the Home Thrive Scale™ at the time of writing this paper is relatively new, having been modified based on user feedback from previous versions to include all the features mentioned above. Therefore, there is still much testing to be done and data to be collected from the field as we continue to roll out to more partner institutions and government agencies. The tool will continue to evolve based on findings to make it as effective as possible.

Conclusion

More often than not, families would choose to stay together if they could and would not place children in institutions if it did not seem absolutely necessary. The Home Thrive Scale™ is designed to be a practical tool to identify and address safety concerns for families to prevent separation where possible, assess and facilitate reintegration options for a child if they're in a CCI, and measure a family's overall progress over time.
By offering it openly and free of cost, Miracle Foundation hopes to make quality case management more accessible so that every child can thrive in a safe and loving family.

Resources

Link to the online Home Thrive Scale™ here. Contact for more information and support with using the tool at safelyhome@miraclefoundation.org. The tool is part of a case management toolkit available on Miracle Foundation's website, which also includes guidelines, templates, and a series of animated videos walking caseworkers through the case management process and the Home Thrive Scale™.

References

- United Nations Convention on the Rights of the Child, November 20, 1989, https://www.ohchr.org/en/professionalinterest/pages/crc.aspx

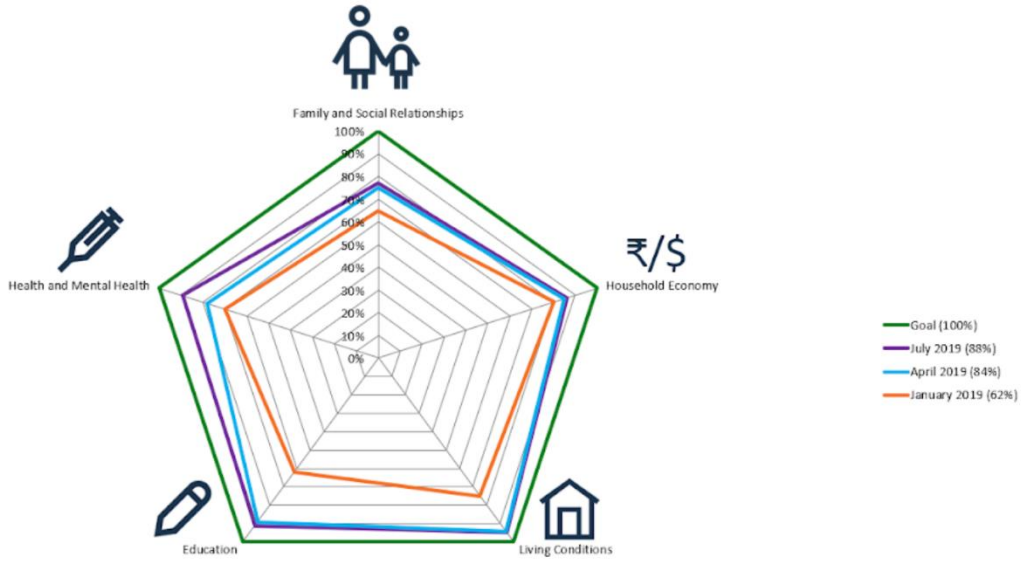

Figure 1: Sample Home Thrive Scale™ scores graphed out to show a family's progress across wellbeing domains over time. Source: Miracle Foundation.

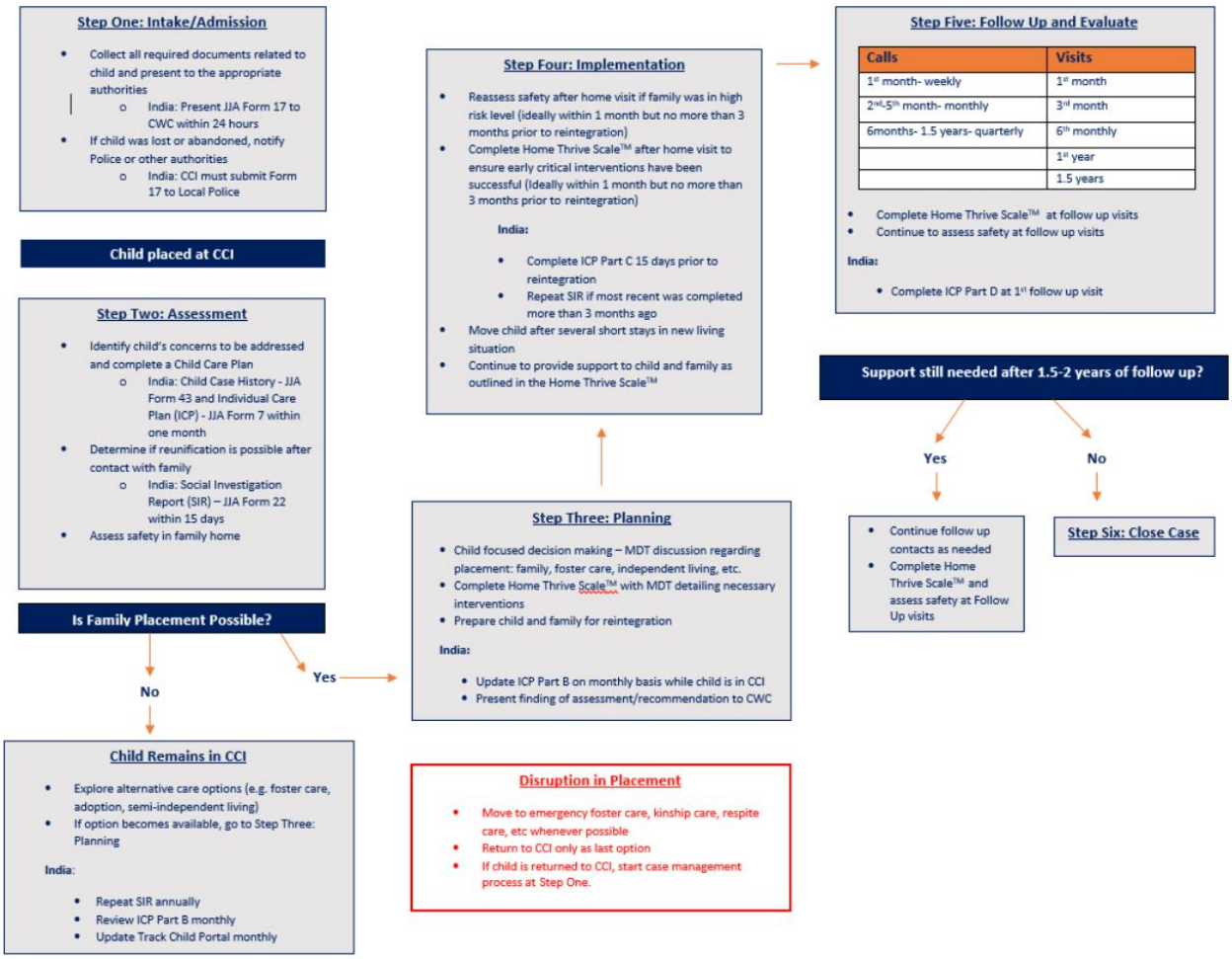

Figure 2: Miracle Foundation's case management workflow outlining steps and timeline for the reintegration process starting from when a child enters an institution. Source: Miracle Foundation.

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[i] Right to Best Interests of Child; Right to Life, Survival and Development; Right to Sharing Thoughts Freely; Right to Protection from Violence; Right to Health, Water, Food, Environment; Right to Food, Clothing, a Safe Home; Right to Protection from Harmful Work; Right to Prevention of Sale and Trafficking; Right to Making Rights Real; Right to Keeping Families Together; Right to Protection of Privacy; Right to Children without Families; Right to Review of a Child's Placement; Right to Access to Education; Right to Protection from Harmful Drugs; Right to Protection from Exploitation; Right to Family Guidance as Children Develop; Right to Respect for Children's Views; Right to Responsibility of Parents; Right to Children with Disabilities; Right to Social and Economic Help; Right to Rest, Play, Culture, Arts; Right to Protection from Sexual Abuse; Right to Everyone Knowing Children's Rights.

[ii] Name changed to protect child and family's confidentiality.