



*Data Collection Exercise in
Orphanages, Children's Homes
and
Residential Facilities for O.V.C.
in Ghana.*

Dpt. Social Welfare/ OrphanAid Africa

2006/7

Aims of this Exercise:

To train Government Social Workers on the need for non-institutional care

- *To collect data on such institutions*
- *To collect data on all O.V.C. living in such institutions*
- *To collect data and encourage the education of all staff in these institutions*
- *To provide data such as the number of adoptable/HIV/fosterable etc. children in the country*
 - *To demand minimum standards for all institutions*
 - *To establish the infrastructure needs of the institutions*

So that SW can subsequently:

- *Resettle in the community or encourage the adoption of as many O.V.C. as possible*
- *Convert a number of institutions into day care /community centres*
- *Warn and ultimately close, all institutions failing to comply with the minimum standards outlined below*
 - *Upgrade the orphanages*

Orphanage AFRICA

Orphanage Africa

How to Use this Form

- This is an **OBSERVATIONAL** data collection form. This means that the Social Worker filling it out is to rely on empirical proof: ie. things seen with his own eyes, rather than replies given by proprietors.
 - The institution should not have advance warning of the visit.
- It needs to be completed with the assistance of the person in charge; if the person is not available, the **OBSERVATIONAL** part can be filed out and an appointment can be made to come back another day.
- It requires photocopies of certain documents, so in most cases a second visit will be necessary.
- Filling of the form should be combined with the education of the proprietors about the new guidelines in ovc care (ie. family and community care)
 - This form is divided into six parts.
 - The first part is the most important.
- The second part asks the institution what donations they need, and can be used first if necessary to ensure a cordial atmosphere
- The third part is the conclusion where the proprietor needs to be told of his shortcomings: his signature is required to prove that he is aware.
 - The fourth part involves one form per child and can be completed another day. The child should be observed in every case.
- The fifth part is the Social Workers report that will be posted to the institution.
 - The sixth part is the “action plan” for change.

After the data collection: all problematic institutions will be visited again by Head Office to ensure that the recommendations in part 6 have been adhered to.

Part 1: Questionnaire

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Name of Institution:
 Phone number:
 District:
 PO Box address:

Specific Location:

Phone number:
 Email:
 Date established:
 Name of Proprietor/ess:
 Particulars of Management Team:

Name of Person in charge:
 Profession/qualifications:
 Name of local SW officer:
 Date of last SW inspection:
 Number of residential children:
 Number of non-residential children:

Reason for being in the institution	Number
Abandoned	
Orphaned	
Surrendered	
In need of care and protection	

Children that could be resettled

Name	Age	Sex	Who with?

Adoptable children

Name	Age	Sex	Is there an affidavit/consent form?

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Name	Age	Sex	Legal link-up

Children in need of urgent medical attention

Name	Age	Sex	Complaint

LEGAL

Standard: The institution has	Yes	No	Notes
Been registered with the Registrar General			
Has a copy of its Regulations attached			
Has a copy of its By-laws attached			
Has a copy of its Constitution attached			
Has a management committee (particulars attached)			
Works with its local Social Welfare Officer			
Owens its own buildings			
Has official indenture for the land			
Has building permission for its buildings			
Keeps records of children correctly and submits them to the SW in the form of an annual report (please attach a copy of your latest report)			

Orphanage

FINANCIAL AFRICA

	Yes	No	Was not aware
Has a well kept donation book			
Gives official receipts for all donations of a financial nature			
Keeps clear account books			
Has a financial officer or accountant			
Has been audited			
Has submitted its year end accounts to Social Welfare			
Has contracts for its staff, stating salary			
Has its staff registered for SNIT and National Health Insurance?			
Has regular income			

<p>Enter income for the last calendar years</p> <p>2005:</p> <p>2004:</p> <p>2003:</p>
<p>From what sources?</p> <p>(add photocopies of contracts)</p>
<p>What are the main regular expenses (With detail)</p>

Orphanage

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the child have been certified/care			
Has sent every child to a family tribunal for custody/care order			
Keeps individual files on all children			
Encourages adoptions:			How many in the last 24 months?
If they have relations, does not have children resident for more than 5 years			
Has a programme for older children to assist them to become independent (i.e. does not send them onto the street at age 18)			
Does not house children over 18			
Encourages relatives to visit			
Has a 10 to 1 (or less) child to carer ratio			
Has a 4 to 1 (or less) baby (under 4 years) to carer ratio			
Has on-going training for staff			
Actively encourages community care			
There is a placement committee			
Staff get literacy, healthcare and family planning as part of their package			

Do you have any donation in hand that you cant use or don't need (ie excess clothes, rice) please give details:

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STANDARDS

Standard	We already meet this standard	No	Notes
Each child has:			
Access to clean drinkable water			
A bed/mat			
A plastic covered mattress			
Two sheets			

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Toothbrush			
School uniform			
Five sets of clothes			
A towel			
A sponge			
Soap			
Toothpaste			
Mosquito nets on windows			
Mosquito nets on beds			
Access to school or training			
Access to toys and reading books			
Free access to a secure outside play area			
Shoes			
Slippers			
Three nutritionally balanced meals a day			
Fruit at least once a day			
School text books and material			

SOCIAL WELFARE OFFICIAL REQUIREMENTS

Standard:	Yes	No	Notes
The home is:			
Clean			
Tidy			
Hygienic			
Safe			
Well ventilated			
Maintained			
Is on the ground floor			
Has a first aid box			
Is far from rubbish dumps, main roads and other health hazards			
Is free of swing doors			
Has a washable floor			
Has covered drains			
Accommodates children with disabilities			
Toilets and chamber pots sufficient for the number of children			

Orphanage

Standard	Issue	Note
Medicine for all the children:		
Registered for the NHIS		
Have access to anti-retro viral therapy if needed		
Average weight for height		
Have access to a visiting doctor at least once a week		
Vaccinated		
Screened for TB		
Screened for anaemia		
Screened for sickle cell		
Screened for sexual abuse		
Screened for HIV		

Part 2 : Basic Needs

	Yes	No	Number/Notes
<i>Food</i>			
<i>Beds</i>			
<i>Water</i>			
<i>Electricity</i>			
<i>Toilets (number...)</i>			
<i>Dinning room</i>			
<i>Kitchen</i>			
<i>Poly tank (number...)</i>			
<i>Pump</i>			
<i>Bedrooms (number....)</i>			

Education

	<i>We would like</i>	<i>We already have</i>	<i>We don't need</i>	<i>Needs supplementary input</i>
<i>Sponsored education off-premises (number...)</i>				
<i>Desks</i>				

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Part Instructu				
Libr				
School building				
TV				
School equipment				
Other.....				

Health

	<i>We would like</i>	<i>We already have</i>	<i>We don't need</i>	<i>Needs supplementary input</i>
<i>Infirmery building</i>				
<i>Infirmery (Furnishings)</i>				
<i>Medicines</i>				
<i>Well Woman Centre (Family planning)</i>				
<i>Full time nurse</i>				
<i>Vitamins</i>				
<i>Food, healthcare and support for people with HIV/AIDS (Number...)</i>				
<i>Other.....</i>				

Agriculture

	<i>We would like</i>	<i>We already have or don't need</i>	<i>Notes</i>
<i>Vegetable garden</i>			
<i>Farm land</i>			
<i>Tools</i>			
<i>Seeds</i>			
<i>Chicken project (layers)</i>			
<i>Guinea Fowl /Turkey Project</i>			
<i>Rabbit Farm Project</i>			

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..... sava - processing project			
Bee-keeping			
Mushroom project			
Palm Project			
Shea butter project			
Ground nut project			
Farming (all staple crops)			
Grass-cutter project			
Other.....			

Income generating activities

	We would like	We already have or don't need	Notes
Internet Café			
School			
Bus service			
Child care			
Guest House			
Volunteers quarters			
Other.....			

PART 3 : Conclusion

The Person-in-Charge should please provide other information on the institution not covered above:

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I hereby declare that all the above particulars are correct.

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Signature :

Date :

Signature of SW Inspector:

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Part 4 Orphan Needs Assessment
(1 per child)

Name of Child _____

Date of entry into home (day/month/year) _____

Home file number:

ID Number Voters id. _____

NHI _____

Passport. _____

Sex ___ Male ___ Female

Date of Birth (day/month/year) _____

Is the child residential?.....

Does he she have relatives? How often do they visit?

If they are not abusive, is the child allowed to stay with them?

NEEDS ASSESSMENT AND SERVICE PROVISION

	Yes	No	Notes
Has been exposed to moral or physical danger			
HIV positive			
Mentally or physically challenged			
Is malnourished (not Av. weight for height)			
Abused			
A refugee			
Has a parent or guardian who does not exercise proper guardianship			

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Was destitute/homeless			
Was mugged			
Attempted resettlement in the community? Add detail as to why this failed			
Exposed to sex before 15 years			

Education

	Need	Available	Provided
Pre-school			
Primary School			
JSS			
SSS			
Non-formal			
Apprenticeship			

Health

	Need	Available	Provided
Disability rehabilitation			
Food support			
Vaccination			
NHI			
Medical care			
Birth Certificate			
Nutrition Rehabilitation			

Social Welfare

	Need	Available	Provided
Counseling			
Resettlement			
Adoption			
Social Workers Report			
Fostering			

Please provide other information not covered above; e.g. Cause of death of parents, if the child is residential or not:

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Part 5 Results of Inspection

Name of Institution:

District:

- Recommendations of SW official:

Additional information required from institution:

Date:

Name and Signature of SW official:

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Part 4. Follow-Up Report

The results of the survey were communicated to the home via registered mail on (date):

The Home was given and ultimatum of (date) for the following reforms to take place:

The date for the home to be again inspected was set for (date):

Team for the inspection:

If the home fails to comply the following action is contemplated:

Date:

Name and Signature of SW official: