

## Processing of Sanctuary Center Case Management

Case Management is an interactive process in which the client and the worker consciously work together toward a reasonable resolution of the clients problem(s).

<b>Office or Division:</b>	Sanctuary Center/ Protective Services Division			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	Government to Government Government to Citizens			
<b>Who may avail:</b>	NGAs/ LGUs/NGOs			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. 1 Original Copy of Referral Letter addressed to Center Head duly signed by the Head of Office of Referring Party		Local Government Unit (LGU)		
2. 1 Original copy of Updated Social Case Study Report duly signed by Social Worker and Head of Office		Local Government Unit (LGU)		
3. 1 Original copy of Police or Barangay Blotter, Tri-media Certificate and Tracer Letter		Local Government Unit (LGU)		
4. 1 Original copy NCMH Referral with Diagnosis and Medicine Prescriptions		NCMH or any accredited psychiatric facility		
5. 1 Original copy Medical Exam Results: Urinalysis, CBC, X-ray Film and Result, Pregnancy Test		Any accredited medical facility		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
<b>A. Pre-Admission of Referral</b>				
1. Coordinate with the center and submit the required referral documents.	1. Receive referral through mail.	None	5min	<i>Admin Aide-IV</i> Sanctuary Center
	1.1. Endorsement to SWO III for review and directions.	None	5min	<i>Admin Aide-IV</i> Sanctuary Center
	1.2. Review of documents, provide direction and	None	2mins	

	<p>endorse to OD / SWO II for the schedule of pre-admission.</p> <p>If complete, pre-admission conference will be conducted every Thursday.</p> <p>For emergency cases, video conference are made.</p> <p>For minor condition such as lacking documents, the referring parties will be informed during the pre-admission conference.</p>			<p><i>Rehabilitation Team Members Sanctuary Center</i></p>
	<p>1.3. Endorsement to SWO II for schedule of discussion of the case being referred.</p> <p>If there are major conditions that needs to be provided medical intervention, that are not within our service at the time of referral, they will be accessed to other government services.</p>	None	3mins	<p><i>Rehabilitation Team Members Sanctuary Center</i></p>
	<p>1.4. Circulate notice of the meeting for pre-ad.</p>	None	10 mins	<p><i>AA-IV Sanctuary Center</i></p>

	1.5 For reach out cases, the NCMH assessment and other medical work- up is necessary.			<i>OD / SWO II</i> Sanctuary Center
2. Attendance to Pre-admission Conference	2. If for pre admission, conduct of Pre-Admission conference with RTM and referring party.	None	1 hour	<i>SWO II</i> Sanctuary Center
	2.1. Prepare and submit confirmation of agreements.	None	30 mins	<i>SWO II</i> Sanctuary Center
	2.2. Forward to SWO III for review and inputs.	None	2 mins	<i>AA-IV</i> Sanctuary Center
	2.3. Review and provide inputs on the draft confirmation of agreements.	None	5 mins	<i>SWO II</i> Sanctuary Center
	2.4. Forward to SWO III for revision and inclusion of inputs.	None	30 mins	<i>SWO II</i> Sanctuary Center
	2.5. Endorsement to SWO III for signature.	None	2 mins	<i>Admin Aide-IV</i> Sanctuary Center
	2.6. Sign enhanced confirmation of agreements and forward to AA for tracking.	None	1 min	<i>SWO III</i> Sanctuary Center
	2.7. Receipt and forward enhanced confirmation of agreement to SWO V for approval.	None	1 min	<i>AA-IV</i> Sanctuary Center

	2.8. Approval of the confirmation of agreements.	None	1 min	<i>OIC / SWO III</i> Sanctuary Center
3. Receive confirmation of agreements For compliance if with lacking admission documents.	3. Mailing of approved confirmation of agreements.	None	3 mins	<i>OD / SWO II</i> Sanctuary Center
4. Confirm schedule of admission process.	4. If for admission, inform the referring party of the scheduled of admission.	None	3mins	<i>SWO II</i> Sanctuary Center
	4.1 If not inform the referring party the reason of disapproval of the referral.	None	5 mins	<i>SWO II</i> Sanctuary Center
<b>TOTAL</b>		<b>None</b>	<b>2 hours, 48 minutes</b>	
<b>B. Admission Phase</b>				
1. Conduct Intake Interview and Assessment.	1. Fill up admission slip and facilitate admission process.	None	30 mins	<i>OD / SWO II</i> Sanctuary Center
	1.1. Immediately assign the case to social worker.	None	1 min	<i>OIC / SWO III</i> Sanctuary Center
	1.2. Establish rapport and orient the client to the goals / objectives of the center.	None	20 mins	<i>OD / SWO II</i> Sanctuary Center
	1.3. Contract setting shall take place by signing agreed treatment plan by the client, her social worker	None	30 mins	<i>OD / SWO II</i> Sanctuary Center
	and other members of the team.			

2. Facilitate Data Collection.	2. Gathers relevant and significant data/ information directly from the client or from other resources that will be basis for sound assessment of the case.	None	30 mins	OD / SWO // Sanctuary Center
3. Assessment / Treatment Planning and Contracting Setting.	3. Prepares Initial Case Study within a week after admission.	None	1 hour	SWO // Sanctuary Center
	3.1. Prepares Comprehensive Social Case Study Report one (1) month after admission.	None	2 hours	SWO // Sanctuary Center
	3.2. Update Social Case Study Reports reflecting the progress of the client in achieving her rehabilitation plans and goals six (6) months after admission.	None	1 hours	SWO // Sanctuary Center
4. Treatment Plan Implementation.	4.1. Contact with the families thru letters or visits upon client's capability to provide information about herself.	None	30 mins	SWO // Sanctuary Center
	4.2. Involvement to home life activities upon assessment.	None	1 hour	SWO // Sanctuary Center

	4.3. Access the needs of the client for services and interventions available within the inter service unit and other agencies that can best serve the needs of the client.	None	1 hour	<i>Rehabilitation Team Members Sanctuary Center</i>
5. Evaluation.	5.1. Check point and periodic evaluation must be undertaken through rehabilitation team meetings and case conference.	None	1 hour	<i>Rehabilitation Team Members Sanctuary Center</i>
	5.2. Recommendations to terminate or continue with the interventions or treatment plans.	None	1 hour	<i>Rehabilitation Team Members Sanctuary Center</i>
	5.3 Update and inform the client on results of assessment or any significant progress or any difficulties faced every phase of the helping process.	None	30 mins	<i>SWO II / Rehabilitation Team Members Sanctuary Center</i>
<b>TOTAL</b>		<b>None</b>	<b>10 hours and 30 minutes</b>	
<b>C. Case Termination and Discharge</b>				
1. Recommend for discharge conference.	1. Assessed to have better understanding of her problem and capacity to cope with situations.	None	1 hour	<i>Rehabilitation Team Members Sanctuary Center</i>
	1.1. Shown capability to undertake everyday tasks and is hopeful for the future.	None		<i>Rehabilitation Team Members Sanctuary Center</i>

	<p>1.2 Rehabilitation goals are achieved as planned specially the readiness and acceptance of her family to take her back into their custody.</p> <p>In case of clients whose families/relatives are traced but refused to take custody, they will be required to sign WAIVER (see attached form) of their decision to delegate their full responsibilities over the client to the center after a year of follow up by the social worker. Said clients will be under custodial care of the center until such time they can be transferred to other custodial care.</p>	None		<i>SWO // Sanctuary Center</i>
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2. Transition Care	2. Home visit conducted to the families/ relatives, other institution or wage/home placement	None	24 hours	<i>SWO II</i> Sanctuary Center
	2.1. Social preparation in relation to client's return to the family.	None	None	<i>Rehabilitation Team Members Sanctuary Center</i>
	2.2. Discharge plan shall be formulated.	None	1 hour	<i>Rehabilitation Team Members Sanctuary Center</i>
3. Confirmation of schedule and attendance to pre-discharge conference	3. Coordinate concerned LGU for pre-discharge conference	None	3 mins	<i>SWO II</i> Sanctuary Center
4. Attendance to pre-discharge conference	4. Conduct of pre-discharge conference	None	1 hour	<i>SWO II</i> Sanctuary Center

	4.1. Preparation of pre-discharge confirmation of agreements	None	1 hour	SWO II Sanctuary Center
	4.2. Forward to SWO III for review and inputs	None	5 mins	SWO III Sanctuary Center
	4.3. Forward to SWO II for revision and inclusion of inputs	None	30 mins	SWO II Sanctuary Center
	4.4. Endorsement to SWO III for signature	None	2 mins	Admin Aide-IV Sanctuary Center
5. Receive copy of Pre-discharge confirmation of agreements	5. Approval of the Pre-discharge confirmation of agreements	None	1 min	OIC / SWO III Sanctuary Center
	5.1. Confirmation of the Schedule of discharge	None	2 mins	SWO II Sanctuary Center
6. Discharge Procedure	6. Accomplished prescribed discharge slip/paper for the information and signature of all Allied services/units.	None	20 mins	SWO II Sanctuary Center
	6.1. Assist the client for medical examination / clearance as well as prescription and schedule of follow up check-up.	None	20 mins	SWO II Sanctuary Center
	6.2. Allow the parents and/or any receiving qualified relatives to understand terms and conditions contained in a pre-formal agreement between the Head Social Worker and the receiving persons on their parental and moral obligations to the	None	30 mins	SWO II Sanctuary Center

	client.			
	<p>6.3 Provide exit counseling with the client to discuss experiences and clarify some issues encountered while at the center.</p> <p>Advice parents/relatives on how to handle client at home and necessity for follow-up consultation and regular intake of prescribed medications as improved mental patient to prevent relapse.</p>	None	30 mins	<i>SWO // Sanctuary Center</i>
	6.4 Provide a copy of discharge slip to all allied services/units.	None	20 mins	<i>SWO // Sanctuary Center</i>
	6.5 Forward referral letter to LGU or DSWD-Regional Offices.	None	30 mins	<i>SWO // Sanctuary Center</i>
	6.6 Prepare transfer summary report and	None	1 hour	<i>SWO // Sanctuary Center</i>
<b>TOTAL</b>		<b>None</b>	<b>1 day, 8 hours, 23 minutes</b>	
<b>D. After Care Service</b>				

1. Continuity of Service and other interventions.	1. Request for monitoring and after-care service	None	5 mins	<i>OIC / SWO III</i> Sanctuary Center
	1.1. Request from the LGU a status report on the progress of the client and his family for the purpose of monitoring and evaluation six (6) months after the discharge.	None	10 mins	<i>SWO II</i> Sanctuary Center
<b>TOTAL</b>		<b>None</b>	<b>15 minutes</b>	

<b>FEEDBACK AND COMPLAINTS MECHANISM</b>	
How to send feedback	Answer the client feedback form and drop it at the designated suggestion box available in the guard house
How feedbacks are processed	The Officer of the Day checks the suggestion box daily and record all feedbacks received
How to file a complaint	Answer the client Complaint Form and drop it at the designated suggestion box available in the guard house Or write a letter to Head Social Worker/ Regional Director
How complaints are processed	The Bayan Muna Committee checks the suggestion box daily and validate each complaint

Contact information of CCB, PCC, ARTA	<b>ARTA:</b> 8-478-5093 <a href="mailto:complaints@arta.gov.ph">complaints@arta.gov.ph</a> <b>PCC:</b> pcc@malacanang.gov.ph 8888 <b>CCB:</b> email@contactcenterngbayan.gov.ph 0908-881-6565
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