



# After-Care Assessment and Plan Tools - Form - I

Developed by -  
Association for Rural Uplift & National Allegiance (ARUNA)  
(A people's Organisation in Development Process)  
Plot-20, Phase-III, Neelachal Nagar, BRAHMAPUR  
District: GANJAM, ODISHA, INDIA

## FORM-I

### PRE-AFTERCARE CASE ASSESSMENT FORM

#### Notes and Guidance for Conducting the Pre-Aftercare Assessment

- **Age of the child/young adult:** 16-18 Years
- **Objective of the aftercare assessment:** To know the personal and social situation of the child and his/her status of development domains to identify and plan for the aftercare support to cover the required knowledge, skill, behaviour, service, and connectedness for social reintegration.
- **Process to conduct the assessment:** The caseworker/Superintendent shall refer/review the latest Social Investigation Report (SIR, Form-7) and Individual Care Plan (ICP, Form-22) of the concerned child/young adult, and in consultation with the child, relevant stakeholders, and experts the aftercare assessment shall be conducted.
- **Key Principle to adhere during the assessment:** best interest of the child.
- **Use of assessment data:** The aftercare assessment data shall be used to develop the aftercare plan [Goal, Intervention area and Strategy], and Monitoring modalities.
- **Accessor (s):** Caseworker/Social Worker of the Childcare Institution; Superintendent of the Aftercare Organisation
- **Stakeholder(s) to be consulted (as per requirement):** Counsellor, Expert, peer, friend, teacher, Parent, Family/community member, others.

Case Details		
CWC Case Number	:	
Name of the Childcare Institution	:	
Name of the Case Worker/Superintendent at CCI/Aftercare Organisation	:	
Contact Number	:	
Email ID	:	

A. PERSONAL		
Name	:	
Date of Birth [DD/MM/YYYY]	:	
Age	:	
Sex [M/F]	:	
Caste	:	
Religion	:	
Contact Number [IF ANY]	:	
A.1 IDENTITY (Put ✓ if available)		
Birth Certificate	:	
Aadhaar Card	:	
Health Insurance	:	
Ration Card	:	
Disability Certificate [If Applicable]	:	
Bank Account	:	

**B. SOCIAL/FAMILY BACKGROUND**

Family Type [NUCLEAR/JOINT]	:	
Family situation [STABLE/BROKEN]	:	
Parental Status [BOTH/SINGLE/NONE]	:	
Caregiving at family [possible/not possible]	:	
Caregiving at extended family (paternal or maternal) [exist/nonexistence]	:	
Does the child have ongoing connection with family or community? [YES/NO]	:	
Does the child expresses willingness to back to family? [YES/NO]	:	
Does the family have ability to care and willingness to receive the child? [YES/NO]	:	

**B.1. FAMILY COMPOSITION**

Serial Number	Name of the Family Member	Relation with the Child	Age	Sex	Education	Income (Monthly)	Disability (If any)

<b>C. CURRENT STATUS OF CHILD DEVELOPMENT DOMAIN</b>		
<b>C.1: CURRENT STATUS OF PHYSICAL HEALTH</b>		
Does the child is physically normal? [YES/NO]	:	
Does the child is susceptible to any disease? [Example – cold, fever, stomach problem, etc.]	:	
Does the child have any life-threatening disease? [Example – Tuberculosis, HIV, Anaemia, etc.]	:	
Does the child have any types of Disability? [YES/NO]	:	
If yes, specify the disability [DESCRIPTION]	:	
Does the child is under any regular medication/treatment? [Example- Regular check-up/Medicine/Diet/therapy/etc.]	:	
<b>C.2: CURRENT STATUS OF MENTAL HEALTH AND PSYCHOSOCIAL BEHAVIOUR</b>		
Is the behaviour of the child normal most of the time towards friend, caregiver, teacher, family member, other? [YES/NO]	:	
Is the child consistent and regular in daily activities like – Eating, Sleeping, Playing game/outdoor sport or exercise? [YES/NO]	:	
Does the child have knowledge and skill to handle and process his/her negative emotions and feelings like – anger, sadness, frustration, hopelessness, insecurity, fear, stress, etc? [Please Specify]	:	
Is the child able to identify and seek support to overcome the pressure of negative thoughts and emotions? [YES/NO]	:	
Is the child a victim of substance abuse?	:	
Is the child showing risk behaviours cyclically? [Example- self injury or trying to commit suicide or harm others, etc]	:	
Does the child expect/need regular motivation, appreciation, reminder, reward to perform his/her activity? [Please Specify]	:	
Do other children, caregiver, teacher, family member are positive and loving towards the child? [YES/NO, specify]	:	

C.3: CURRENT STATUS OF LIFESKILL		
Does the child is able to identify his/her strength and weakness to work on to improve, required for social reintegration (to sustain life outside the childcare institution)? [Example – do not know road crossing, talking to an officer for the benefit s/he is entitled to, etc]	:	
Does the child have sense and skill of understanding and managing risks? [Example – not receiving/transmitting virus/infectious disease OR abuse at workplace, etc.]	:	
Does the child know the value of money for now and future? [Job, Carrier, Employment, Income, Expenditure, Saving, Loan, etc.]	:	
Does the child have a strong sense/perception/interest towards building] his/her carrier pathway? [YES/NO]	:	
Does the child have a vivid sense of imagination towards his plan of action once going out of the childcare institution? [YES/NO]	:	
Does the child follow anyone as role model for being successful or serve the society? [Please Specify - Mention Name of the role model with designation]	:	
C.4: CURRENT STATUS OF EDUCATION AND VOCATIONAL INTEREST		
Does the child is currently undergoing formal education? [YES/NO]	:	
If yes, in which Class/Standard?	:	
Name of School/College	:	
Type [PRIVATE/GOVERNMENT]	:	
Performance in last Exam [RESULT – Percentage of Mark]	:	
Does the Child have strong interest/liking towards vocational study/training? [YES/NO]	:	
If yes, please specify about the interest and the source of motivation. [DESCRIPTION]	:	

D. EXPECTATION, ANALYSIS, AND RECOMMENDATION	
What the child does expect from the aftercare support? [Knowledge, skill, education, training, counselling, job placement, reunification with family, marriage, etc.]	: 1.
	: 2.
	: 3.
	: 4.
	: 5.
What are the key observations/analysis about the child' development domain vs his/her expectation from the aftercare? [assumption, risk, pattern, non/realistic, behaviour, etc]	: A.
	: B.
	: C.
	: D.
	: E.

Recommendation of the Case Worker/Superintendent of the Childcare Institution/Aftercare Organisation for the aftercare intervention for the child **[Key considerations, Priority area to improve/support, risk mitigation, life skills, behaviour pattern, mental health, career interest, etc.]**

**RECOMMENDATION:**

**DATE:**  
(of assessment)

**SIGNATURE:**  
(of caseworker/superintendent)

**ANNEXURE:**

1. Social Investigation Report (SIR)
2. Individual Care Plan (ICP)