

GOVERNMENT OF LIBERIA MINISTRY OF HEALTH AND SOCIAL WELFARE



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REGULATIONS FOR THE APPROPRIATE USE AND CONDITIONS OF ALTERNATIVE CARE FOR CHILDREN

February 2010

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Foreword

After more than twenty years of civil unrest and violent conflict, peace has been restored, an elected government is in place, and Liberians are moving forward to rebuild the country. Liberians can now live in a relatively peaceful environment that affords them the opportunity to design strategies and plan programs that promote the rights of children.

These Regulations and Tools are designed to create the basis for reforming welfare institutions, thereby protecting children and providing opportunities for those living in alternative care. The appropriate use of forms of alternative care such as foster care, kinship care and institutionalization constitutes a demonstration of our joint commitment and willingness to work with our partners for a more promising future in the best interest of Liberian children.

Enforcement of these Regulations will facilitate the deinstitutionalization of children who are in institutions primarily due to the socio-economic conditions of their parents and families. Hence, these Regulations will guide us in the reunification of children and the empowerment of their families and communities to ensure strong family preservation. Our vision is to have an improved and effective system that provides opportunities for all children to develop their fullest potential.

The Ministry of Health and Social Welfare shares this vision with our partners in the international development community. It is our hope that the new Regulations and Tools will become an inspiration for all partners and stakeholders providing care for children in Liberia. We ask that you join us as we embark on our journey towards providing the most appropriate regulations to protect and care for our children. This will assist us in realizing our vision, as children are our future and the path to a brighter Liberia.

A Quienigt

Walter T. Gwenigale, M.D./Minister Ministry of Health and Social Welfare

Acknowledgement

The Regulations and Tools for appropriate use and conditions of alternative care for children were achieved through a lengthy and intense process. The Social Welfare Core Team, directly led by the Minister of Health and Social Welfare, Dr. Walter T. Gwenigale, is gratified with the completion of the Regulations and Tools appropriate use and conditions of alternative care.

For this accomplishment we would like to acknowledge the dedicated support received from several individuals and organizations. Key among them, we would like to acknowledge the financial and technical support from UNICEF that allowed us to complete this intense process, WHO, Save the Children UK, Christian Aid Ministries Orphan Relief and Rescue for their technical support; Handicap International, SOS-Liberia, UNMIL Human Rights Section, Union of Orphanages for their technical support; as well as all other national and international partners that in many ways contributed towards the development of this Regulations and Tools for appropriate use and conditions for alternative

Additionally, we are pleased to also thank the collaboration of the Ministry of Justice, Ministry of Education, Ministry of Agriculture, Ministry of Labour, Ministry of Internal Affairs, Ministry of Planning and Economic Affairs and Ministry of Gender. These line Ministries actively contributed needed technical assistance from their various representatives.

Ministry of Health and Social Welfare staff played a significant role in the development of the Regulations and Tools for appropriate use and conditions of alternative care particularly among them; we would like to recognise the following Ministers: Dr. Walter T. Gwenigale, Minister of Health and Social Welfare; Mrs. Vivian Cherue, Deputy Minister for Administration; Dr. Bernice T. Dahn; Deputy Minister for Health Services and Chief Medical Officer; Mr. Tornolah Varpilah, Deputy Minister for Planning, Research and Development and Co-Chair of the Social Welfare Policy Core Team; Mrs. Bendu A. Tulay, Assistant Minister for Social Welfare, Ms. Lydia -Mai Sherman, Senior Executive Coordinator, Department of Social Welfare and Mrs. Victoria Zaway, Director for family Welfare, We are also pleased to extend our thanks and appreciation to the Office Staff of the Deputy Minister for Social Welfare, the Coordinators and Directors of the Divisions of the Department of Social Welfare, for their tireless support towards the development of the Regulations. Finally, we would like to extend our compliments to Social Welfare Professional who provided outstanding professional assistance, Sophie Pawon, USAID David Konneh, Don Bosco Homes Ina Christensen and Susan Grant, SCUK, Mr. David Tambara, UNMIL and Mr. Ibrahim Sesay, UNICEF.

HEAL ; Kind regar Geebro, M **SPMSW** DeputyzMinister for Social/Welfare and Co-Chair National Social Welfare Core Team HBERIA .

1. These regulations may be cited as the Children Welfare Institutions Regulations for *Citation* the Provision of all forms of Alternative Care for Children.

2. In these regulations, unless the context otherwise requires

- The term "institution" refers to a children's welfare institution providing alternative care;
- A "child" is considered to be any person below the age of 18 years;
- The term "separated child" is used to refer to a child who has not attained the age of 18 years or the legal age of majority, who is separated from his/her biological parents and is not being cared for by a guardian or another adult who by law or custom is responsible to do so. This includes: children without any adult care, children living in dangerous situations and children who are in families other than their own;
- The term "orphan" is used to refer to a child below the age of 18 years or the legal age of majority whose natural parent/s is/are dead;
- An "orphanage" is an institution for the care and protection of children without biological parents, often operated by the government or a charitable organization.

3. Purpose and Objective of the Regulations (Minimum Standards)

3.1. These standards identify the roles and functions of alternative care institutions or arrangements for children in Liberia as described in Part IV, Chapter 31, Article 31.1. of the Health Standard of Public and Private Institutions as well as the principles of the United Nations Convention on the Rights of the Child and other international instruments for the appropriate use and conditions of alternative care for children.

3.2. The Government of Liberia, through the Ministry of Health and Social Welfare (MoHSW), will regulate all child welfare institutions, including orphanages and alternative care arrangements such as foster care and kinship. All child welfare institutions in Liberia are required by law to comply with these regulations. Non-compliance to these guidelines will result in the immediate revocation of accreditation and closure of the institution.

<u>Purpose</u>

- a. To support efforts to keep children in, or return them to, the care of their family or, failing this, to find another appropriate and permanent solutions;
- b. To ensure that, while such permanent solutions are being sought, or in cases where they are not possible or are not in the best interests of the child, the most suitable forms of alternative child care are identified and provided, under conditions that promote the child's full and harmonious development;

Supportive, protective and caring environment for the child and the family

Purpose and objective of the Regulations

Interpretation

4. General Principles and Perspectives

- 4.1. As the family is the fundamental group of society and the natural environment for the growth, well-being and protection of children, efforts should primarily be directed to enabling the child to remain in or return to the care of his/her parents, or when appropriate, other close family members
- 4.2. Every child and young person should live in a supportive, protective and caring environment that promotes his/her full potential. Children with inadequate or no parental care are at special risk of being denied such a nurturing environment.
- 4.3. All decisions, initiatives and approaches falling within the scope of these Regulations will be made on a case-by-case basis and must be grounded in the best interests and rights of the child concerned, in conformity with the principle of non-discrimination and taking due account of the gender perspective. They should respect fully the child's right to be consulted and to have his/her views duly taken into account in accordance with his/her evolving capacities, and on the basis of his/her access to all necessary information.
- 4.4. The Government of Liberia through its Ministry of Health and Social Welfare and in partnership with other relevant ministries and institutions will employ special efforts such as legal, financial, technical, etc. to tackle discrimination on the basis of any status of the child or parents, including poverty, ethnicity, religion, gender, mental and physical disability, HIV/AIDS status or other serious illnesses, whether physical or mental, birth out of wedlock, and socio-economic stigma, and all other situations and status that can give rise to relinquishment, abandonment and/or removal of a child.

Alternative care as a last resort

Alternative Care

- 4.5. All decisions concerning alternative care should take full account of the desirability, in principle, of maintaining the child as close as possible to his/her habitual place of residence, in order to facilitate contact and potential reintegration with his/her family and to minimize disruption of his/her educational, cultural and social life.
- 4.6. Decisions regarding children in alternative care, including those in informal care, should have due regard for the importance of ensuring children a stable, caring ad loving home and of meeting their basic needs for safe and continuous attachment to their caregivers, with permanency generally being a key goal.
- 4.7. Children must be treated with dignity and respect at all times and must benefit from effective protection from abuse, neglect and all forms of exploitation, whether on the part of care providers, peers, or third parties, in whatever care setting they may find themselves.
- 4.8. Removal of a child from the care of the family should be seen as a measure of last resort and for the shortest possible duration. Removal decisions should be regularly reviewed and the child's return to parental care should be assured once the original causes of removal have been resolved or have disappeared.

- 4.9. Financial and material poverty alone, or conditions directly and uniquely imputable to such poverty, should never be a justification for the removal of a child from parental care, for receiving a child into alternative care, or for preventing his/her reintegration, but should be seen as a signal for the need to provide appropriate support to the family.
- 4.10. Siblings (with existing bonds) should not be separated by placements in alternative care, unless there is a clear risk of abuse or other justification in the best interests of the child. In any case, siblings should be enabled to maintain contact with each other, unless this is against their wishes or interests.
- 4.11. Recognizing that the majority of children without parental care are looked after informally by relatives or others, the Government of Liberia through the Ministry of Health and Social Welfare and in partnership with other relevant ministries and institutions will ensure their welfare and protection while in such informal care arrangements, with due respect for cultural, economic, gender and religious differences and practices that do not conflict with the rights and best interests of the child.
- 4.13. No child should be without the support and protection of a legal guardian or other recognized responsible adult at any time.
- 4.14. The provision of alternative care should never be undertaken with the purpose of furthering the political, religious or economic goals of the providers.
- 4.15. Prevent the separation of siblings, and in cases where the placement is of an emergency nature, or is for a predetermined and very limited duration with planned family reintegration or other long-term care solution, including adoption as its outcome.

Measures of Implementation

- 4.16. The |Government of Liberia will to the maximum extent possible, allocate sufficient financial resources and appropriate technical capacities to ensure the optimal and progressive implementation of these Regulations throughout the country in a timely manner.
- 4.17. The Government of Liberia through its Ministry of Health ad Social Welfare shall be responsible for determining any need for, and requesting, international cooperation in implementing these Regulations. The enhanced implementation of these Regulations will factor in development co-operation programmes in enhancing and promoting the rights of children.
- 4.18. These Regulations are intended to complement existing national legislation.

Implementation measures of the Regulations

PART II: FRAMEWORK OF CARE PROVISIONS

Application for Registration

5.1 No institution shall operate in Liberia without a certificate of accreditation obtained from the Ministry of Health and Social Welfare.

5.2 An institution shall submit an Application Form for registration accompanied by the following documents to the Ministry of Health and Social Welfare:

- Copy of accreditation document obtained from the Ministry of Planning and Economic Affairs;
- Financial statement of the institution for the past years of existence of the institution (applies only for renewal);
- Proof of funds of at least LD 1.2 million
- A child protection policy to govern the conduct of the staff of the proposed institution in their dealings with children in and outside of the institution;
- Staff profiles and proof of their qualifications and Police clearances;
- The organization's constitution and/or by-laws certified by the secretary or principal officer of the institution, including a statement of purpose;

6. Period for Response to Application

Upon receipt of an application for the registration of an institution, the licensing authority shall within 14 days acknowledge the application and within 3 months assure the necessary investigations and decisions to determine the suitability of the institution are conducted.

7. Matters in Determining an Application for Registration

In determining the suitability of an institution, the Ministry of Health and Social Welfare shall take into account the following matters:

- a. The degree of likelihood of the objectives and proposed plan of activities to advance the survival, development, participation, and protection of children;
- b. The capacity of the proposed institution to comply with these Regulations;
- c. The capacity of the proposed institution to respect the rights of children irrespective of sex, colour, religion, origin, or ethnicity;
- d. Any other matters that may be conducive to the well-being of children under the care of the institution.

No institution to operate without a license

Form of application registration

Period for response to application

Matters in determining an application for registration

PART III: RESPONSIVE PLANNING

8. Statement of Purpose and Policy

8.1 Every institution shall have a mission statement or purpose in its constitution, which accurately sets out the objective of the institution for child well-being and the manner in which such an objective is to be realised.

8.2 Every institution shall indicate cause in its work the implications of its statement of purpose, which shall include but not be restricted to:

- a. The objective(s) to be attained through the institution;
- b. A description of the facilities to be provided to children in the institution;
- c. Arrangements for supervision, training, and development of members of staff;
- d. Specification of the age range, sex, and numbers of children to be cared for by the institution per year; and
- e. The criteria used to admit children to the institution.

8.3 All agencies and facilities shall ensure that they have written policy and practice statements, consistent with the present Regulations, setting out clearly their aims, policies, methods, and the standards applied for the recruitment, monitoring, supervision and evaluation of qualified and suitable carers to ensure that those aims are met.

PART IV: GENERAL CONDITIONS FOR THE PROVISION OF ALL FORMS OF QUALITY ALTERNATIVE CARE

9. Duty to Devise Individual Plans for Every Child

9.1 An institution shall undertake a holistic assessment of the needs of each child to be placed in the institution and accordingly devise and implement an individual plan for the child.

9.2 The Welfare Institutions shall have a maximum caseload of 50 children under 18 years of age, keep accurate records of all children and provide the Ministry of Health and Social Welfare with regular updates.

9.3 The discharge of the duty to devise plans for individual children shall include but not be restricted to:

- a. Taking into account the views and wishes of a child during the design, implementation, and review of the plan related to the child proposed to be placed in the institution or already so placed;
- b. The design and implementation of a plan that focuses on the preparation and support of the child into adulthood.

10. Duty to Allow Contact with and the Role of Parents, Guardians, and Relatives

10.1 A person registered to operate an institution shall ensure that every child in the institution receives practical support from his/her mother, father, relatives, friends, and/or other people who may play a significant role in the child's development and life.

10.2 The discharge of this duty shall include but not be limited to:

- a. Written guidance to members of staff on the rights of children, parents, relatives and others to maintain contact with the child;
- b. Incorporation of the opinions and wishes of parents, guardians, and relatives into the personal plans of children in the institution, subject to the best interests of a particular child concerned.

11. Suitability of the Living Environment - Compatibility of Location and Design to Statement of Purpose

11.1 The person registered to operate an institution shall ensure that the design, size, and location shall be compatible with the statement of purpose of the institution.

11.2 The person registered to operate an institution shall ensure that:

- a. The location of the institution takes into account proximity to education, health, leisure, and transport facilities;
- b. Where the institution accommodates a child with disabilities, there are

Duty to devise individual plans for every child and maximum case load of 50 children in any care facility

Duty to allow contact with and the role of parents, guardians and relatives

Compatibility of location, and design to Statement of Purpose suitable aids and adaptations to the physical and other environments to enable such children live as comfortably as possible;

- c. There is no compromise in the provision of quality care and respect of privacy as a result of the design of rooms and other amenities in the institution;
- d. Effective precautions are in place for the security of the children and staff in the institution;
- e. There are promoted links between the institution and community members in the surrounding environment.

12. Duty to Provide Accommodation

12.1 The person registered to operate an institution shall ensure that accommodation provided to children in alternative care, and their supervision in such placements, enable them to be effectively protected against abuse. Particular attention should be paid to the age, maturity and degree of vulnerability of each child in determining his/her living and sleeping arrangements. Measures aimed at protecting children in care shall not involve unreasonable constraints on their liberty and conduct in comparison with children of similar age in their community.

12.2 The person registered to operate an institution shall provide in the institution adequate domestic style facilities for children living in the institution;

12.3 The person registered to operate an institution shall ensure that:

- a. The institution is furnished and decorated to create a child friendly atmosphere for the children residing in the institution;
- b. The premises of the institution are kept in good repair;
- c. Quiet and conducive facilities for study are maintained;
- d. Each child should have its own bed and provided with sufficient beddings;
- e. Bathrooms and washing facilities are clean and designed to safeguard the privacy, dignity, and safety needs of children who use these facilities;
- f. The numbers of toilets and bathrooms is sufficient to avoid undue pressure on the facilities and inconvenience to children in the institution;
- g. Regular assessment of risks in the institutions;
- h. Precautionary plans to avoid such risks are implemented;
- i. Children and staff know the evacuation procedures in cases of fire and other emergencies.

12.4 The following prohibited measures shall apply to facilities and these include among others:

- a. Verbal, emotional, sexual, or physical harm to a child or children;
- b. The use of power or influence to change the names of children and or coerce them to change their personal beliefs;
- c. Using one child or a group of children to punish another child or children;
- d. Mandatory greeting of visitor guests with songs or performance;
- e. Using work punitively and or forcing a child to do staff work;

Duty to provide adequate and conducive accommodation

- f. Denying a child visit to family and or significant adults;
- g. The physical examination of children by unqualified staff;
- h. Displaying children for fund raising;
- i. Fasting by children;
- j. Trail by ordeal;
- k. Co-habitation of living quarters with animals.

13. Provision of Adequate and Competent Staff and Conditions of Work

Competent staffing

13.1 The person registered to operate an institution shall ensure:

- a. Prior to employment, carers, volunteers and other staff in direct contact with children are carefully selected concerning professional qualifications, knowledge and a background in child welfare, employment history, references, and systematically subject to psychological evaluation and personal background checks and employment history, including wherever possible checks on their criminal record.
- b. Staff and volunteers receive clear job descriptions;
- c. Children are not subjected to situations where there may be abused by visitors and strangers to the institution;
- d. Supervision of staff working with children, including on methods for working with children and staff roles and accountabilities;
- e. The institution implements a staff development and training plan. Managers must acquire training in: parenting skills, child development, child psychology; identifying and reporting common childhood diseases; infectious diseases; health and nutrition; orphanage and financial management; child rights and participation; child protection issues such as sexual and physical abuse, and any other training required by the Ministry of Health and Social Welfare;
- f. The performance of staff is appraised periodically and objectives and means are set for greater performance;
- g. Access to sources of counselling for staff;

13.2 Conditions of work, including remuneration, for carers employed by agencies and facilities shall be such as to maximize motivation, job satisfaction and continuity, and hence their disposition to fulfil their role in the most appropriate and effective manner.

13.3 The person registered to operate an institution shall ensure that the minimum ratio of caregivers to children excluding support staff such as cooks or security personnel must be:

- a. Children below 5 years 1:3
- b. Children aged 5-12 years 1:5
- c. Children 13-17 years 1:10

14. Duty to Protect the Child in the Institution and Promote Participation

14.1 All alternative care settings should provide adequate protection to children from abduction, trafficking, sale and all other forms of exploitation and neglect. Any consequent constraints on their liberty and conduct should be no more than strictly necessary to ensure their effective protection from such acts.

14.2 The discharge of the duty to protect the child in the institution shall extend but not be limited to the:

- a. The existence of procedures for dealing with allegations, abuse, neglect, or exploitation;
- b. The training of staff in child protection;
- c. The implementation of a procedure to refer to the police any member of staff who may have abused, neglected, or exploited any child in the institution;
- d. Counselling and rehabilitation services to any child who may have been abused, neglected, or exploited by any person in and outside the institution;
- e. An atmosphere in the institution where bullying is understood as unacceptable;
- f. Existence of known and used methods for countering bullying;
- g. Children who are bullied are supported and those who may have bullied others are given suitable guidance;
- h. The implementation of procedures to ensure that children are not absent from the institution without authority and that when a child is missing from the institution, prompt steps are taken, in liaison with social services and the police to find such as a child.

14.3 All institutions will ensure that child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child. The discharge of the duty to assure the participation of children shall extend but not be limited to:

- a. Children and staff jointly developing rules and discussing roles, rights, and responsibilities;
- b. Staff creating an environment that allows children to report issues affecting them;
- c. Children receiving current information about programme changes and be involved in decision-making on issues related to their care and welfare;
- d. Children being involved in every aspect of their care and the planning of their care;
- e. Children being involved in family tracing and reunification;

15. Duty to Prescribe and Maintain a Conflict Resolution and Complaints System

15.1 The person registered to operate an institution shall ensure that the institution has and implements a culture and procedure to address grievances for children, staff, parents, guardians, relatives, and other persons interested in the best interests of the child.

15.2 The implementation of such a procedure shall extend but to be limited to:

- a. The ascertainable wishes and feelings of the child concerned;
- b. The making of both minor and major complaints by children and staff in the institution concerning the operation and management of the institution;
- c. The making of complaints by parents, guardians, relatives, and other members of the public regarding the operation and management of the institution;
- d. Training of staff in the institution on the handling of internal and external complainants and conflict resolution within the institution;
- e. Provision of the right to appeal in cases of dissatisfaction with any decision taken in the resolution of a conflict or a complaint.

15.3 All disciplinary measures and behaviour management constituting torture, cruel, inhuman or degrading treatment, including corporal punishment, closed or solitary confinement or any other sanction that may compromise the physical or mental health of the child must be strictly prohibited in conformity with international human rights law. Restriction of contact with members of the child's family and other persons of special importance to the child should never be used as a sanction.

15.4 Use of force and restraints of whatever nature should be authorized only when strictly necessary for safeguarding his/her or others' physical or psychological integrity, in conformity with the law and in a reasonable and proportionate manner and with respect for the fundamental rights of the child. Restraint by means of drugs and medication should be based on therapeutic needs and shall never be employed without evaluation and prescription by a specialist.

15.5. Children in care should have access to a known, effective and impartial mechanism whereby they can notify complaints or concerns regarding their treatment or conditions of placement. Such mechanisms should include: initial consultation, feedback implementation and further consultation. Young people with previous care experience should be involved in this process, due weight being given to their opinions. This process should be conducted by competent persons trained to work with children and young people.

Duty to prescribe and maintain a conflict resolution and complaints system

Disciplinary measures and complaints procedures

16. Record Keeping

Duty to keep adequate and safe record of the child

16.1 All alternative care services shall have a clear policy on maintaining the confidentiality of information pertaining to each child, which all carers are aware of and adhere to.

16.2 The person registered to operate an institution shall ensure comprehensive and up-to-date records should be maintained regarding the administration of alternative care services, including detailed files on all children in their care, staff employed and financial transactions.

16.3 The records on children in care should be complete, up-to-date and secure, and include information on their admission and departure, and the form, content and details of the care placement of each child, along with any appropriate identity documents and other personal information. Information on the child's family should be included in the child's file as well as in the reports based on regular evaluations. This record shall follow the child throughout the alternative care period and be consulted by duly authorized professionals responsible for his/her current care.

16.4 The above-mentioned records should be made available to the child, as well as to the parents or guardians, within the limits of the child's right to privacy and confidentiality. Appropriate counselling should be provided before, during and after consultation of the record.

17. Duty to Respond to the Needs of Individual Children

17.1 The person registered to operate an institution shall cause the staff at the institution to take into consideration the racial, cultural, religious, linguistic backgrounds, and any disabilities that the respective children in the institution may have.

17.2 Without prejudice and subject to the child's evolving capacities, the person registered to operate an institution shall: -

- a. Cause the staff in the institution to seek opinions of children in the institution over key decisions that are likely to affect the current and future lives of such children;
- b. Ensure that care providers take into account the views of the parents, guardians, and relatives of the children residing in the institution;
- c. Maintain work processes in the institution that requires staff to consider racial, ethnic, cultural, linguistic, and religious backgrounds of the children and any disabilities that respective children in the institution may have;
- d. Provide means for any child with learning or communication difficulties to make her or his wishes known regarding her or his care and well-being in the institution.

Duty to respond to the individual needs of children, including psychosocial support

18 Privacy for Children

(1) The person registered to operate an institution shall oversee the compliance of guidelines for the respect of every child's wish for privacy and confidentiality subject to the protection of the child and sound parenting.

(2) Without prejudice the Regulations on privacy and confidentiality shall cover the following areas:

- a. Provision of intimate personal care for all children;
- b. Access to case records by staff;
- c. Disclosure of personal information to other parties;
- d. Personal bodily privacy;
- e. Sensitivity to gender in, particularly when interacting with children of the opposite sex; and
- f. The occasions on which it may be necessary to search a child or his/her belongings and the conduct of such a search.

19. Duty to Provide Food

(1) The person registered to operate an institution shall ensure that children receive appropriate nutritional supplementation and adequate amounts of wholesome and nutritious food in accordance with local dietary habits and relevant dietary standards, as well as with the child's religious beliefs.

(2) The duty to provide food to children in the institution shall extend but not be limited to:

- a. Menus that are (nutritionally) varied;
- b. Adequate quantities;
- c. Access to drinking water at all times;
- d. Responsiveness to special dietary, health, and religious needs.

20. Duty to Attend to the Health of Every Child in the Institution

20.1 The person registered to operate an institution shall oversee procedures for meeting the health and psychosocial needs of every child in the institution.

20.2 The person registered to operate an institution shall ensure:

- a. That a policy exists and is implemented on the promotion of the health of children in the institution;
- b. Access for each child to medical, dental, nursing and other advice and treatment;
- c. Staff in the institution are trained in the use of first aid and that at all times, at least one person on duty has appropriate first aid skills;
- d. That first aid boxes and other emergency medical supplies exist in the institution;
- e. That a full-time staff nurse is employed and arrangements for a visiting

Duty to attend to the health of every child in the institution

Privacy for children

Duty to provide food

doctor or physician assistant are made;

- f. That all children are provided with annual preventive medical examinations and are screened for TB, anaemia, sickle cell, and polio;
- g. That necessary vaccinations are provided to all children and that current vaccination records are kept by the institution;
- h. That guidance on health is rendered to all children in the institution and particular advice is provided to individual children according to needs, including on HIV/AIDS, nutrition and diet, immunization and screening, exercise and rest, sexual health, personal hygiene, and the effect of smoking, alcohol, and substance abuse;
- i. That support is provided for the particular needs of the child, including needs related to physical or sensory impairment, learning disabilities and other medical or developmental problems;
- j. Prescribed medication for any child is properly administered;
- K. That a written record is maintained of any significant illnesses and accidents suffered by any child as well as of medication taken by various children in the institution;
- 1. Children, members of staff, volunteers, and visitors in the institution do not smoke.

20.3 All staff must comply with the Health Standards and Private Institutions laws. They must pass through medical examination by a licensed physician, skin test, routine tests, TB test and undergo additional examination as deemed necessary by the Ministry of Health and Social Welfare.

21. Duty to Facilitate Access to Education and Learning

21.1 The person registered to operate an institution shall ensure that the institution has a policy on the advancement of every child's education during his/her residence in the institution and that children should have access to formal, non-formal and vocational education in accordance with their rights, to the maximum extent possible in educational facilities in the local community.

21.2 The duty in this regulation shall extend but not be restricted to:

- a. The provision of facilities and materials conducive to study and education appropriate to each child's age, aptitude, interests, and potential;
- b. Liaison with schools attended by any children in the institution on the advancement of the education of a child residing in the institution.

22. Duty to Provide Leisure Facilities Resources

22.1 The person registered to operate an institution shall facilitate a range of opportunities for involvement in sport and leisure activities for children in the institution;

22.2 The person registered to operate an institution shall facilitate:

a. The celebration of national holidays and children's birthdays in the

Duty to facilitate access to education and learning

Duty to provide leisure facilities resources

institution;

- b. A proper balance between free and structured time for children in the institution;
- c. Friendships between children in the institution and other children.

23. Community Involvement

- 23.1 The County Child Protection Network in coordination with the Ministry of Health and Social Welfare shall reserve the right to monitor all child welfare institutions to ensure best care and practice for children. These functions include placement, family tracing and reunification, documentation, and referral of children in welfare institutions, etc.
- 23.2 Integration with community children-recreation, cultural and other activities shall be organized jointly with children from the community surrounding the institution in order to facilitate the children's transition to family life and to foster greater community involvement.

24. Reporting, Inspection and Monitoring

24.1. Person registered to operate an institution or facilities providing alternative care services will be held legally responsible for ensuring that the quality of care provided is in keeping with these Regulations and with applicable national laws and policy.

24.2. The Ministry of Health and Social Welfare shall conduct frequent inspections and monitoring of institutions and facilities which will comprise of both foreseen and unannounced visits and would involve discussion with and observation of the staff and the children; consulting in conditions of privacy with children in all forms of alternative care, visiting the care settings in which they live, and undertaking investigations into any alleged situation of violation of children's rights in those settings, on complaint or on its own initiative.

24.3 Mandatory reports to the Ministry of Health and Social Welfare will be required from persons registered to operate an institution on incidence related but not limited to:

- The death or serious injury of a child;
- Serious changes in child's health;
- Any child unaccounted for absence;
- Alleged or observed physical, emotional, sexual, or verbal abuse;
- Criminal charges filed against a staff member or volunteer;
- Substance abuse, including alcohol and drugs by a staff member or volunteer;

Participation of communities

Regular monitoring of institutions

Duty to monitor the welfare and care of protection of children

Support for after care

25. Support for After-care

25.1. Agencies and facilities should have a clear policy and carry out agreed procedures relating to the planned and unplanned conclusion of their work with children to ensure appropriate after-care and/or follow-up. Throughout the period of care, they shall systematically aim at preparing the child to assume self-reliance and to integrate fully in the community, notably through the acquisition of social and life skills that is fostered by participation in the life of the local community.

25.2 For agencies providing after care, the process of transition from care to aftercare should take into consideration the child's gender, age, maturity and particular circumstances and include counselling and support, notably to avoid exploitation. Children leaving care should be encouraged to take part in the planning of aftercare life.

25.3. Ongoing educational and vocational training opportunities shall be imparted as part of life skill education to young people leaving care in order to help them to become financially independent and generate their own income.

25.4 Access to social, legal and health services, together with appropriate financial support, shall also be provided to young people leaving care and during after-care.