DESCRIPTION OF THE PRACTICE

1. Title of the practice

P.U.E.R.I. Project

2. Organisation responsible for the practice

National Council of Social Workers (CNOAS), Italy

3. Contact person(s)

Name / E-mail	Annunziata Bartolomei, Vice-president info@cnoas.it

4. Summary of the practice

The P.U.E.R.I project 'Pilot Action for Unaccompanied minors: Early Recovery Intervention' is a personalised reception system for unaccompanied children (UC).

The project is based on promoting the best interest of the child, and improves the reception system for UC by providing a protective framework which can help prevent their disappearance.

From the arrival hotspot for migrants, UC are transferred to a first reception centre where three assessment interviews are held to prevent the risk of trafficking and exploitation.

A multi-disciplinary team of social workers, psychologists and cultural mediators conduct the assessment of the UC through these interviews.

The results of the interviews help in setting up a personalised reception pathway to guide their care plan and social integration.

An IT system is also in place for the collection of personal data, and to monitor useful information. This information is shared with the network of services which work with UC.

5. National/regional/local context of the practice

The project is managed by National Council of Social Workers (CNOAS) and the Italian Home Office at the hotspots of first reception facilities in two regions.

6. Staff involved

A social worker, a psychologist and a cultural mediator form the working teams for supporting the UC.

7. Target group

Unaccompanied children (UC)

8. Aims of the practice

The aim is to provide personalised support to UC to improve their social integration and wellbeing.

9. Issues for social services

Service Integration/ Cooperation across services	X	Service Planning		Contracting	
Technology	X	Skills development (of the workforce)		Quality of services	X
Others: _____					

ANALYSIS OF THE PRACTICE

10. Status

Pilot project (ongoing)	X	Project (ongoing)		Implemented practice (restricted areas)	
Pilot project (terminated)		Project (terminated)		Widely spread practice/rolled out	

11. Scope of the practice

Describe the setting of the practice, considering the following criteria:

- *Micro level practice:* practice that involves individuals at local level
- *Meso level practice:* practice that involves organisations or communities
- *Macro level practice:* practice that involves large population groups

Meso: The practice involves the coordination of multiple organisations.

12. Leadership and management of the practice

Description of the leadership of the practice, considering the following criteria:

- *Collaborative management*: shared between large partnerships, often of central, regional and local representation
- *Organisational management*: by one organisation
- *Professional management*: managed by a single person
- *Shared management*: shared with no defined leadership

The project is managed by CNOAS, and coordinated by the Home Office at the hotspots of first reception facilities in two regions: Sicily (Trapani, Lampedusa, Agrigento) and Puglia (Taranto).

13. Engaging stakeholders in the practice

Description of the engagement of stakeholders, considering the following criteria:

- *Individual practice*: individuals have sought practice change
- *Network approach*: one or more organisations develop a network
- *Collaborative approach*: large collaboration with relevant stakeholders

Network: CNOAS and the Home Office work closely together, and information sharing with other services is also enabled through the IT system.

14. Involvement of service users and their families

Description of the involvement of service users, considering the following criteria:

- *Team involvement: service users and carers were part of the practice team*
- *Consultative: a consultative body of users was set up for an on-going dialogue and feedback*
- *Involvement in care: person-centred approaches to care/support*

N/A

15. Costs and resources needed for implementation
Description of how the practice is financed, considering the following criteria:
• *Within existing resources:* staff time and other resources are provided 'in-house'
• *Staffing costs:* costs for staff investment
• *Joint/Pooled budgets:* two or more agencies pool budgets to fund services
• *Funded project:* external investment

€ 1,650,000 for personnel costs, organization, equipment, etc. Co-financed with FAMI EU funds.

16. Evaluation approaches
Description of the evaluation method of the practice, considering the following criteria:
• *Multi-method:* use of both a qualitative and a quantitative approach
• *Single method:* qualitative or quantitative approach
• *Audit:* looks at data sources such as existing medical records, and/or other routinely collected service data.
• *Informal:* refers to in-house service evaluation using locally designed tools and/or collecting opportunistic feedback
• *No evaluation*
• *An evaluation is planned*

Through the IT system, the data of children was collected to track support provided, and the history, needs, and expectations of the children.

At the same time, risk and protection factors have been identified to shape the paths that best respond to rights advocacy and protection.

The activity of the professionals involved was also monitored, through the support of the University of Catania who supported the design and evaluation of the practices.

17. Measurable effects of the practice and what it has achieved for…	
Service users	1,814 minors have been supported and 5,603 interviews carried out.
	The project has helped to limit the loss of minors from reception centres, through professional evaluations and supported transfers to reception facilities.
Formal care givers	
Informal carers	
Organisations	The European Commission considers this project as best practice, with a member of the project now included in a European Commission working group on reception for UC.
Other	

18. <u>Anticipated or 'aspirational'</u> effects of the practice and what it has achieved for… *This category can include outcomes which are not documented, quantified or properly evaluated. They can include such elements as improved knowledge, quality, workforce, etc.*	
Service users	Through information sharing and multi-disciplinary teams for developing personalised plans, the social integration of UC is improved and their disappearance from reception centres reduced.
Formal care givers	
Informal carers	
Organisations	
Other	

19. How the practice has changed the way the service is provided (lessons learned)

20. Sustainability of the practice *Description of whether the practice is sustainable, considering the following criteria:*   *Potential for sustainability:* practice was newly started or is on-going/not yet mainstreamed. How could the practice be sustained (in terms of resources)?   *Organic sustainability:* service users have been empowered to take the practice forward   *Established:* the project has been operational for several years
The project depends on funding from the Home Office which makes annual decisions on funding. The practice model is recognised for its effectiveness and has become the guideline for hotspot managers working with vulnerable adults and children.

21. Transferability of the practice *Description of whether the practice has been transferred, considering the following criteria:*   *Transferred:* transfer to other regions, countries, service user groups, etc.   *Potential for transferability:* there is interest from the outside; elements of the practice have been taken up and used elsewhere; material for transferability (for ex. training material) has been developed
The practice could be replicated, in particular in European contexts with high numbers of UC, in particular where there is the opportunity to establish professional reception services and the possibility of working with local services networks.