



# **Overview of this** Children's Home

# **Background & Mission**

Bridge of hope was established in 2011 by the charity organization Bridge of Hope Children Ministry based in the UK. It is a fully registered and approved home for homeless and abandoned children, boys and girls ages 2 to 7 years old. The home is located in the Kabashaki eastern division, Kebisoni T.C Rukungiri District. Their overall mission is to provide a caring and safe environment for homeless and abandoned children. The vision of the home is to provide holistic care for these vulnerable children, regardless of their social or religious background.



## **The Thrive Assessment**

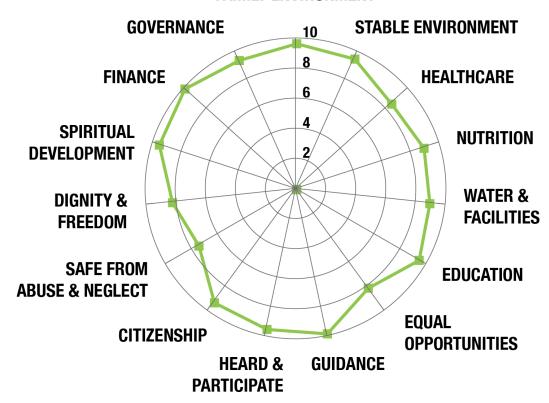
#### What is the Thrive Assessment?

In 1959, the United Nations (UN) adopted the Declaration of the Rights of the Child, which defines children's rights to protection, education, healthcare, shelter, nutrition and more. We have codified all 13 Rights, as well as a Finance Standard and a Governance and Human Resource Standard, resulting in a total of 15 standards. These standards ensure that children receive care that truly helps them to thrive, now and in the future.

The Thrive Assessment will be administered every 6 months with each partner home to chart the progress of each standard. Our team works with caregivers to outline next steps which and compiled into an Improvement Roadmap.

#### **Current Thrive Scale**

#### **FAMILY ENVIRONMENT**





# **Strategic Initiatives**

#### **CONSTRUCT A WALL OR FENCE**

PROJECT DESCRIPTION	So as to improve on home security, the home would like to construct a wall fence on the home premises.
ESTIMATED FUNDING	UGX 3000000 USD 833

#### **PURCHASE COMPUTERS**

PROJECT DESCRIPTION	Purchasing 3 more computers at the home is needed so that children can have better access to computers for learning.
ESTIMATED FUNDING	UGX 2700000 USD 750



## Right to Live with Family

**SURVIVING** 

**SUSTAINING** 

**THRIVING** 

The home has 9 staff in total and 23 children that stay in the home currently. There are 7 caregivers including 2 mothers, and 2 social workers. They help support 205 children in total, but many of the children live within the surrounding communities (some of which are disabled) with their parents or guardians who are in position to house them. Some of these children receive family support, meaning they are given meals, medical support, funds to pay school fees, and a small monthly allowance. Within the home, 2 mothers stay on-site consistently, except on days off or during leave. !A schedule is in place for continuity purposes as well. The home maintains records per child. There is a registration book in which records are kept such as: the area the child has been taken from, guardians, personal files, age, and school performance. Caregivers are trained on child protection policies and trauma informed care on a quarterly basis by social workers, probation officers, and CBOs trainers that come from the district (this includes trauma informed care), on a quarterly basis. New staff are oriented upon onboarding, interviews are conducted, references are called, and a probation period of 3 months is given. Siblings are encouraged to play and spend time together. A social worker and the probation officer accompany the children when visiting their families, and they also prepare the child for reunification. A counselor also evaluates the caregivers on the care they give to the children.

☐ Continue with current practices.



#### Right to a Stable Environment

**SURVIVING** 

SUSTAINING

**THRIVING** 

House rules are explained clearly to the children according to their ages and they are disciplined appropriately. Punishments like limited play, or chores like mopping and sweeping are given in relation to age and ability. Children are called by their names and not nicknames. They engage in unstructured play during their free time after doing homework, as well as other structured activities like crocheting and basket weaving. Family groups work and play together as a family. They also engage in digging, shopping, and going to church. Caregivers meet quarterly with a counselor. When sponsors of the children come, they also meet and discuss behavioral ideas to help effectively teach and discipline in their care. Caregivers have off days and there is a timetable that is followed. Caregivers are committed to more than 2 years of service, with the newest caregiver having 2 years in the home. They participate in discussions often on how to create a good environment for the children and have meetings monthly with a topic to discuss. Caregivers play with the children at times when they are free. Family groups celebrate birthdays together and go out for trips, shopping, open markets, church, etc.

☐ Continue with current practices.



**SURVIVING SUSTAINING THRIVING** 

Within 24 hours of arrival for each child, they are subjected to health checks e.g., HIV tests, vaccinations. Whenever there is need, children see a doctor, but there are no annual wellness checks. All children are receiving vaccinations and have their standard vaccination documents. Soap and water are available, and drinking water is also always available. Children are reminded to always wash their hands before and after meals and liquid soap is added into the water and placed near toilets and latrines. They have a pediatric physician identified at Nyakibaale Health Center and Kahengye Health Center II where children receive treatment. Adolescent girls receive enough sanitary towels and social workers together with mothers teach basic hygiene practices and proper disposal methods. Children are cleaned immediately after soiling, though most of the children are grown. The home is in position to attend to children's orthodontic issues, and children brush their teeth daily. Children receive annual vision checks and those with eye problems are taken to Ruharo eye Hospital in Mbarara. No annual dental checks are conducted, but this is done when they visit Nyakibaale Health Center if a need arises. Each child has a medical records file, also referred to as a case file. Children are not checked for lice, but a doctor examines them and if infection is found, treatment is given. The home has a well-stocked first aid kit and children receive medication whenever they are sick. There is petty cash that can support emergencies, but it's not specific to medical care. There are no facilities for disabled children, since they are not admitted in the home.

- Conduct annual well checks.
- Have a medical emergency fund.



**SURVIVING** 

**SUSTAINING** 

**THRIVING** 

Children get 4 meals a day and receive a balanced diet. Food is prepared in a hygienic manner. Storage areas are free from toxic substances and pests. The kitchen area is kept clean all the time and is well ventilated. They prepare tasty food for the children, and children are able to join their mothers in preparation of meals, when they are free. Protein foods are given to them on a daily basis, and greens and fruits accompany each meal. They do not have a nutritionist, but general knowledge is applied when preparing diets for the children. Additionally, a health worker advises them on diets for children with special needs (ones living with HIV). Cooks are not trained annually on food safety and preparation, but they are guided by the social workers.

Consult a nutritionist to ensure that children receive quality	/ meai	IS.
--	--------	-----

Train cooks annually on food safety and preparation.



**SURVIVING SUSTAINING THRIVING** 

The probation officer and the district health inspector come quarterly to inspect the facility. The home has reliable drinking water and children can access it whenever they want to drink. They have tanks for rainwater harvesting and tap water which is free from chemicals, but they are not sure of decaying pipes. Each room has a functioning bulb and the outdoor premises are adequately lit to ensure security. They have a safe disposal method for sewage and waste water and an understood emergency plan. The home has both solar and hydroelectricity, as well as fire extinguishers and skilled maintenance personnel at their disposal. Safety concerns have been addressed and facilities are safe and capable of withstanding elements. The home currently has no smoke alarms. There is no annual written plan to address property maintenance, but repairs are done quarterly. Additionally, during meetings areas of concern are brought to the attention of home leadership who address any need for repairs. Facilities are up to code with local government requirements and the electrical infrastructure is well wired, but not yet installed in the houses. Instead, they use solar power due to cost constraints. Staff are trained on the importance of drinking water quality and its relation to health.

	Create an	annual	written	plan to	address	property	maintenance
--	-----------	--------	---------	---------	---------	----------	-------------

	Install	smoke	alarms	In	the	facilit	y
--	---------	-------	--------	----	-----	---------	---



**SURVIVING** 

**SUSTAINING** 

**THRIVING** 

All children attend school at least 80% of the time. All children 7 years old and older are assessed by teachers and social workers and are able to identify each letter. Children ages 11+ are able to read and do basic math including addition, subtraction, and multiplication. There are no children below school age, the youngest being 3 years and already in school. Children are assessed and there is no child with learning disabilities. The young children are read to using age-appropriate reading material by their caretakers and older children also have time allocated to read. Books are accessible and available in both English and local languages. The home has internet and computer access, but it is mostly used by staff, with 1 computer for all kids. Children have group tutoring and receive support through bible club, but they also gather children from the community who join them to learn. They have 2 houses within the facility and each has a library with enough age-appropriate books. There is funding and housing available for children post-orphanage. A tutor discusses grades for each child with the administration and children have frequent access and instruction on how to use computers, though they have only one computer to share. There are age-appropriate art supplies and children get access to one-on-one tutoring when there is need.

Avail more compute	rs at the home so	that children ca	an get better acce	ss to computers

Assess one-on-one dedicated tutoring once a week.

## Right to Equal Opportunities

**SURVIVING** 

**SUSTAINING** 

**THRIVING** 

Each child has their dedicated space for storing belongings as they each have a bag where personal items are kept. All children receive the same opportunities to develop their education. There are no children with disabilities in the home, but disabled children are being supported in the community. The home provides an opportunity for all children to have a transition plan to adulthood, regardless of gender or other factors. Both male and female adults act as role models and are available for counsel. There are no children with learning disabilities at the moment, but the children that are behind academically are being helped. The home is also in position to avail medical care to children that have club feet and arrive at the home or to children with this condition that live within the community. Additionally, those that need glasses to correct eye defects may be recommended by a doctor.

Mobilize resources so that the home accommodates children with disabilities.



**SURVIVING** 

SUSTAINING

**THRIVING** 

There is a job description in place where age and education backgrounds are considered. Caregivers model respectful behavior and children are taught about their bodies. There are house rules in place to ensure that children behave well, and children are talked to in ways that they can understand. They also receive counseling and psychological healing once a month. Caregivers are evaluated by a social worker to determine if they are quality mentors. These evaluations include how they talk to the children, how they discipline children, and how they handle or train the children. Adolescents are prepared in advance about changes due to puberty. Caregivers are taught how to model, teach and reinforce basic life skills e.g., children tend their own flower gardens, knit, and weave. Children are educated on responsible sexual behaviors by both the social workers and mothers.

The home has a policy documented in the Bridge of Hope child protection policy. Caregivers receive training on how to manage sexual behavior through seminars. Children receive psychological healing regularly, and before going back to their homes for longer visits or holidays, counseling is also done on an individual and group basis. Children 15+ are exposed to different work, career and educational opportunities e.g., carpentry, shoe making, bee keeping. Adolescents have a written transition plan and Bridge of Hope provides support for the children even after being resettled or reunified. Children who are resettled or reunified usually join the sponsored children in the community and support is given until the child is in position to take care of themselves. There is a documented life skills program for the kids to join during their stay in the home to learn things like sewing, weaving etc. There is ongoing communication and support to young adults who leave to pursue a vocation and/or university.

Continue with current practices.



#### Right to Be Heard and Participate in Decisions

**SURVIVING** 

**SUSTAINING** 

**THRIVING** 

Children decide on what they want to do in their free time. Their needs are acknowledged most times, as long as they are within the home's reach. Children also participate in menu planning, pick out their own outfits on a daily basis, and are given information about their healthcare. Children are allowed to opt out of non-essential activities, but this isn't common in the home. The home has a plan in place for every child, which is updated all the time. This plan includes tracing of family members and information about their education. For those that finish with school and have no family relations, Bridge of Hope purchases land and constructs houses for them. The children do have leadership roles on occasion such as a person In charge of the library, but this is to a lesser extent since the home wants to treat children equally.

Engage children In more leadership roles.



## Right to Be Prepared for Citizenship

**SURVIVING** 

**SUSTAINING** 

**THRIVING** 

The home keeps birth certificates, immunization cards, baptism records, medical reports, school reports, and recommendation reports per child. Caregivers are trained to help children be responsible and the children have age-appropriate chores that are assigned to them. They know their turns on the chores like goat grazing or cleaning utensils, and these are done under the supervision of their mothers. The home observes public holidays, but they do not have any local holidays. The home is also free from litter. Children participate in non-routine activities such as shopping and going on trips to national parks. They are also taught about ethics and the governing process. Mentors help teach children life skills e.g., shopping, making baskets etc. They participate in church through readings and singing, but do not currently participate in community service. Current events are shared with the children at the home as updated by their mothers, I and they have radios per house.

Involve the children in community service at least twice a year.



**SURVIVING** 

SUSTAINING

**THRIVING** 

The home employs guards that watch over the facility overnight, but not during the day. The property also has a fence made of barbed wire around the home and a wooden gate that is not lockable. This fence is majorly to create demarcations of the property and to keep away animals. However, the surrounding community is safe as they have built a good relationship with the community members who alert the home of any strangers seen surveilling the premises. There are private facilities for bathing, using toilets and getting dressed. Boys and girls share dormitories, but these are separated in sections with one section for boys only and the other section has the girls. All staff and ancillaries receive training on alternatives to corporal punishments through district quarterly training. One on one time between individuals is not allowed and this is documented in the home's policy. The home implements child protection programs to ensure no abuse occurs and there is a documented policy that prevents child exploitation. Caregivers are trained on how to recognize and prevent abuse whenever necessary and children are always being evaluated for signs of abuse. Children are always accompanied offsite. There is a visitor policy in place, prior communication is required before any visits occur, and caretakers are not allowed to bring relatives into the home. Former guardians are evaluated before being granted permission to see their children. Background checks are done on all staff through LCs, including calling their references. Intake assessments are used by social workers to evaluate a child's need to work through trauma and receive counseling as needed as well.

П	Construct a	wall or fence	around the home	to improve	security.
$\blacksquare$	OUTSHADE A	wan or icrioc	around the norme	to intiplove	occurrey.

П	Train	caretakers	every s	ix months	on how to	recognize:	and prevent	ahuse
ш	main	Carciancis	CVCIYS		OH HOW LO	recognize	and prevent	abuse



**SURVIVING** 

**SUSTAINING** 

**THRIVING** 

Children bathe twice a day including in the morning before they go to school and in the evening before going to bed. Caregivers encourage the children to be kind and respect each other. Each child has their own bed and each room has 6 children, with three double decker beds. Children have enough clothes and are taught to care for themselves as much as possible. Consequences for infractions of rules are discussed and communicated regularly. They have proper bed linens cleaned weekly and each child has their own tooth brush and towel. There is a safe outdoor play area and children have enough toys and art materials. Children can speak their native language in the home and are able to do extra things such as sell their handicrafts within the home and keep the money earned from such sales. However, they don't work for money in the community.

Give teenagers an opportunity to work in the community and keep what they earn.



**SURVIVING** 

**SUSTAINING** 

**THRIVING** 

Children have an opportunity to be a part of a spiritual community as they go to church and participate in church activities. They are free to practice communal prayer daily and use the sitting room for their prayers and meditation. Children learn about and participate in religious holidays like Christmas. Spiritual and religious materials and books are available and accessible. Children are given service opportunities to practice their spiritual learnings and a quiet place is available for prayer and meditation.

☐ Continue with current practices.



**SURVIVING** 

**SUSTAINING** 

**THRIVING** 

All incomes and expenses are documented and records are maintained. The manager makes daily and monthly financial reports while the director does the bookkeeping. Income taxes are filed on time. Receipts are kept and statements are generated by month. However, the home does not have profit generating activities. Accountability is maintained for all expenses done. Misuse of funds is prohibited, and there is a financial policy in place that is followed closely. The home operates on an annual budget and bank accounts are reconciled monthly. There is adequate segregation of financial duties for internal controls. They have a review of all financials by the trustees and external auditors.. The internal auditor checks books on a monthly basis and the external auditor annually. The home has budgets for all their major expenses and qualified accountants validate the books for the organization annually.

□ Continue with current practices.

# Governance and Human Resource Standard

**SURVIVING SUSTAINING THRIVING** 

Bridge of Hope has a lease from the government for their land for 49 years, which is renewable, and the home has a land title. An experienced caregiver orients the new staff for 3 months. They have their organizational chart shared with all staff to keep them well aligned to their goals. Regular staff meetings are held monthly, and if there are urgent issues to discuss, they are addressed immediately. A written job description and appointment letter are given which outlines responsibilities of each staff member. The home has a license, certificate of registration, and a working permit. Caregivers receive annual training on child development, but not specifically on attachment. The home has an active board of directors that meets annually. Caregivers attend annual training on caring for sick children and teaching good hygiene. All staff have off days and annual leave, which is planned. Code of conduct and training is provided by the home to staff members in order to facilitate child participation.

Train caretakers on child attachment and development annually.

# Current Improvement Partners



#### **Both Ends Believing**

Both Ends Believing (BEB) is an organization with a global presence. They offer an incredible case managment software (Children First Software) that helps governments creat digital identities for vulnerable children, a pivotal step in placing kids in families. Our partnership with BEB Uganda looks like training members of their team in the Thrive Certification Program so they can enhance the support they give to the children's homes they work with.

For a list of projects and opportunities to coordinate on go to www.ACHF.org/Projects







