GENERIC NORMS AND STANDARDS
FOR SOCIAL WELFARE SERVICES

Towards Improved Social Services
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Foreword by the Director-General

The development and implementation of service standards is a critical requirement for the transformation and improvement of service delivery by public institutions. This is provided for in the White Paper on the Transformation of Public Service (1995), which outlines service standards as one of the eight principles underpinning the transformation process. In response, the Department of Social Development (DSD) developed and implemented the Integrated Service Delivery Model (ISDM) and later drafted the Framework for the Social Welfare Service Delivery.

These two documents outline the DSD’s commitment to the development and implementation of service standards in its respective programmes. Service standards are a mechanism through which the DSD can measure its response to the needs of the needy, marginalised, poor and vulnerable groups of society. The document Generic Norms and Standards for Social Welfare Services has been developed to guide the delivery of integrated quality service to identified beneficiaries. I therefore recommend that this document be read in conjunction with the ISDM and the Framework for Social Welfare Services.

These norms and standards were developed after an intense process of consultation with all partners in the delivery of social welfare services. I commend you all for the time, expertise and commitment to the development process. This process ensured that the partners will take ownership of the document based on the contribution made and the willingness to facilitate its implementation at all levels of service delivery – national, provincial, district and local. These norms and standards are generic to all service providers at these levels and are applicable to all social welfare programmes. I trust that we will all find a way of commencing with the implementation of these norms and standards so that a holistic and integrated evaluation of social welfare services in the country can be realised.

Collaboration, quality and service integration are at the centre of these norms and standards, which will be of use to government and non-governmental organisations, managers responsible for resource allocation, and social service professions and occupations responsible for the delivery of social welfare services. This is a key milestone in the realisation of integrated social welfare services, and I believe that different social welfare programmes will use these norms and standards as the basis for their own specific norms and standards.

Director-General
Department of Social Development
Executive Summary

The programme for Social Welfare Services is one of the three programmes (i.e. social welfare, community development and social security) through which the Department of Social Development (DSD) renders its services. Guided by the principle of integrated social development, the social welfare programme has developed a model for the application of generic norms and standards. The model takes into consideration the influence of each of the three programmes on the others in facilitating and ensuring the realisation of quality services to identified service beneficiaries. This explains the reference to community development strategies and community-based interventions for target groups including access to social assistance and social relief services to promote the general welfare of society.

The document Generic Norms and Standards for Social Welfare Services is based on the developmental approach adopted by the DSD through the White Paper for Welfare (1997), and, as such, it seeks to contribute to the achievement of social development goals through developmental social welfare programmes. The document is classified according to the elements of the generic norms and standards model, namely the contextual, organisational, process and outcomes factors related to service delivery, which are interrelated and supportive of each other.
PART I

GENERIC NORMS AND STANDARDS FOR
SOCIAL WELFARE SERVICES MODEL
I. Generic Norms and Standards for Social Welfare Services Model

Figure 1: Model for integrated generic norms and standards

This model shows the interrelationship between all the elements of the generic norms and standards. The model has been developed for referencing purposes and to increase practitioners’ and managers’ understanding of this document. The figure below covers each component of the elements of the model, from the contextual to the organisational and process to the outcomes norms and standards. The DSD believes that this document will be a useful tool in the implementation of norms and standards in social welfare services. Specific norms and standards have been developed for each element of the model.

I.I. Contextual Norms and Standards

Contextual norms and standards relate to the context in which social welfare services should be rendered, and they set the foundation for the delivery of such services. They describe the preconditions for service delivery and the system or governance mechanisms that are essential for achieving quality social welfare service delivery. Fulfilling these preconditions is the responsibility of the public sector and those responsible for creating the context (e.g. the policy, legislation and quality assurance) within which social welfare service providers operate.
Policy and legislation development; strategic planning – including environmental assessment – collaborative partnerships; quality assurance and monitoring and evaluation are all components of contextual norms and standards.

1.1.1. Policy and Legislation Development

The Social Welfare Policy and Legislative Framework contain the mandate for government, non-governmental organisations, the private sector and social welfare practitioners to render social welfare services. The policy and legislative framework is consequently a key precondition for quality social welfare services.

1.1.2. Collaborative Partnerships

The manner in which stakeholders in the social welfare services sector cooperate and communicate with each other influences how the sector is able to achieve goals set in relation to the DSD’s constitutional mandate. The DSD places a high value on collaboration and partnership for effective service delivery. Cooperation and partnership have to meet specific requirements in order to ensure effective collaborative public management of social welfare services.

1.1.3. Strategic Planning

Strategic planning relates to the provision of support and direction to the overall planning and delivery of services to ensure alignment with strategic, policy and legislative mandates. Such alignment requires regular assessment of the social environment to identify factors that may threaten the welfare of the population.

1.1.4. Quality Assurance

The beneficiaries and sponsors of social welfare services are entitled to know what services and what quality of service can be expected from service providers. Service delivery should be monitored for compliance with the quality assurance framework with the help of indicators developed for social welfare services.

1.1.5. Monitoring and Evaluation

Effective monitoring and evaluation of services is essential for measuring the success of developmental social welfare service delivery. Such monitoring and evaluation helps service providers manage their services better by providing timely feedback on services. The monitoring and evaluation framework should make provision for the continuous monitoring of inputs, outputs, process, and outcome and impact indicators to inform planning and decision making.
1.2. Organisational Norms and Standards

Organisational issues relate to the characteristics of the service provider and the operations, management and governance involved in rendering social welfare services. They also relate to the tools and resources service providers have at their disposal for rendering services, which include the human, physical and organisational competences needed for service delivery. Organisational issues are considered a key measure of quality because of their direct effect on the performance of the social welfare service provider from a managerial perspective. The following organisational aspects of service delivery are covered in the norms and standards.

1.2.1. Management

Management includes the elements that ensure the operational implementation of mandates and strategies. It relates to funding, business planning and budgeting, administration, research and programme development.

1.2.2. Funding

Funding refers to the overall funding of social welfare services in the country. It includes the maintenance of appropriate funding systems and financing models for services and compliance with public finance management regulations through reporting and the promotion of accountability. Social welfare service funding is provided by national, provincial and local spheres of government.

1.2.3. Business Planning and Budgeting

A business plan is the ‘operationalization’ of strategies in a specific area of application and service delivery. The business plan and budget ensure the short-term implementation of services delivery by providers. Business planning and budgeting should be linked to the appropriation of funds and the identification of programmes to be implemented to achieve set social welfare service goals.

1.2.4. Administration

Administration refers to the systems that are applicable to the day-to-day management and administration of social welfare services by service providers.

1.2.5. Research

Evidence-based practice integrates individual social welfare practitioner expertise with the best available evidence from practice models and research while also considering the values and expectations of clients. Research can be categorised into two broad areas: primary research (experiments, clinical trials, surveys) and secondary research (overviews of major studies, practice guidelines, decision and economic analyses).
1.2.6. Programme Development

Programme development entails the design, implementation and evaluation of specified programmes linked to any of the identified services in the generic basket of services. Most services find expression through programmes developed for target groups or strategic focus areas.

1.2.7. Service Enablers

Service enablers refer to key elements for which funding of social welfare services is required. They represent the combination of resources that provide the capacity for service providers to deliver services.

1.2.8. Human Resources

Human resources refer to the provision of an appropriate workforce. The term also refers to the recruitment and selection, performance management, training and continuous development of social service professions and occupations and support staff.

1.2.9. Infrastructure

Practitioners require adequate, appropriate infrastructure and equipment to perform their identified tasks in respect of social welfare service delivery.

1.2.10. Information Technology

Information technology (IT) encompasses the entire process of defining, evaluating, protecting and distributing relevant information in the welfare sector. It includes the provision of relevant information to the right person at the right time in a usable form to facilitate planning and decision making. IT also covers procedures and information systems designed to collect, process, store, and disseminate information.

1.2.11. Training and Development

A key element of quality service delivery is the initial and continuous training and development of social service practitioners to ensure that they have a clear understanding of contexts, approaches, services and beneficiaries.

1.2.12 Supervision

The idea behind the supervision of social service practitioners is to ensure the delivery of quality services to beneficiaries while supporting and building the capacity of practitioners.
1.3. Process Norms and Standards

Process norms and standards refer to the regulation of social service professions and occupations that render social welfare services. They inform service users and the public about the standard of conduct they can expect from practitioners and protect the well-being and promote the interests of beneficiaries. They guide the relationship between social welfare service providers and beneficiaries. They also set the tone for service provision by setting standards for the services to be provided and the manner in which they will be provided.

Three key dimensions of social welfare intervention are — in terms of process norms and standards — the responsibilities of practitioners, the service to be provided and the dynamics of the relationship between practitioners and beneficiaries.

1.3.1 Practitioners

A social welfare practitioner is used to describe any and all of the social service professions and occupations identified in the policy and legislative framework to render social welfare services. This framework addresses the requirements to be accredited to practice, the supervision of practitioners and the ethical conduct of practitioners.

1.3.2 Service Beneficiaries

Service beneficiaries will differ depending on the type of intervention, namely micro, mezzo or macro. These terms refer, respectively, to the individual, the family or group and the broader community.

1.3.3 Services Provided

Seven services have been identified as a broad framework for services. These services are provided on four levels of service delivery through a generic intervention process.

1.4. Outcome Norms and Standards

Outcome norms and standards describe the tangible results of the actions taken to improve beneficiaries’ current and future situation as well as overall quality of life. They also describe the capacity of particular services to respond objectively to beneficiaries as a key outcome in monitoring and evaluating the quality of social welfare services.
PART II

GENERIC NORMS AND STANDARDS FOR
SOCIAL WELFARE SERVICES
2.1. Contextual Norms and Standards

2.1.1. Policy and Legislation

Policy and legislation provide the mandate for the social welfare sector and are a precondition for service delivery. The norms and standards make provision for the development, implementation and review of a legislative and policy framework for rendering social welfare services. They define the applicable criteria, the related scope and the objectives. The table below indicates the norms and standards applicable to policy and legislation development and implementation.

<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| C-PL-1  | The social welfare sector should develop a stable and comprehensive legislative framework to regulate the delivery of quality social welfare services | • The Department of Social Development (DSD) should, in consultation with relevant authorities at all levels of government, develop a legislative framework that informs the social objectives and allocation of responsibilities.  
• The legislative framework should be clearly understandable.  
• The legislative framework should emphasise the involvement, empowerment and choice of beneficiaries.  
• The social welfare sector should review the legislative framework every three to five years. |
| C-PL-2  | The social welfare sector should develop a supportive Social Welfare Policy Framework in order to create an enabling environment for the delivery of quality social welfare services | • The DSD should develop a Social Welfare Policy Framework to inform all levels of government and the social welfare sector.  
• Social welfare policies should be based on a thorough analysis of the social environment and context.  
• Social welfare policies should be based on quantitative and qualitative research evidence.  
• Social welfare policies should be non-discriminatory and ensure mainstreaming of services to person with disabilities, community-based services and family-based interventions.  
• **Social welfare policies should enable and support the delivery of social welfare services and provide for:**  
  o services and programmes that promote social cohesion, combat social problems and contribute to the implementation of human rights;  
  o services and programmes that integrate life stages and focus areas. |
<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| C-PL-2 (Cont.) | The social welfare sector should develop a supportive Social Welfare Policy Framework in order to create an enabling environment for the delivery of quality social welfare services | • The DSD should publish the Social Welfare Policy Framework and make it available to all service providers.  
• The social welfare sector should review the Social Welfare Policy Framework every three to five years and as and when it is deemed necessary. |
| C-PL-3 | The DSD should establish a Council for Social Service Professionals (SACSSP) and ensure its continued functioning | • The DSD should establish the SACSSP in line with legislated requirements.  
• The SACSSP should regulate the registration of social welfare practitioners.  
• A register for social welfare practitioners should be established and made available to the  
  DSD and relevant stakeholders on the national website.  
• The SACSSP should set guidelines for professional conduct, standards and accreditation systems and monitor them constantly.  
• Registration of social workers, student social workers, social auxiliary workers and other social welfare practitioners is compulsory and should be regulated by the SACSSP. |
| C-PL-4 | The DSD should develop and implement the Social Welfare Policy Framework in partnership with stakeholders to manage collaborative partnerships in the sector | • The Social Welfare Policy Framework should provide for the following:  
  o Communication among collaborating partners including the channels of communication, time schedules and written communication.  
  o Roles and responsibilities of partners.  
  o Stakeholder management.  
  o Accountability of partners.  
  o Accreditation of service providers.  
• The DSD should ensure that service delivery partners receive training on the policy framework in order to promote common understanding.  
• The DSD should monitor and evaluate the implementation of the policy framework. |
2.1.2. Strategic Planning

Strategic planning relates to the provision of support and direction to overall planning and service delivery. The table below indicates the norms and standards applicable to strategic planning in terms of the role players, the criteria and the approach to be followed when developing strategies for rendering social welfare services.

<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| C-SP-1  | The social welfare sector should develop strategic plans in line with the policy and legislative framework | • Social welfare strategic plans in all spheres of government and civil society should be aligned to government’s programme of action as reflected in the policy and legislative framework.  
• Social welfare strategic plans should be in line with economic and social policies and guide the integration of economic and social programmes.  
• The development of strategic plans should follow an intersectoral, interdepartmental approach.  
• **Strategic plans should reflect the following:**  
  o How existing and new legislation and international prescripts have informed strategy.  
  o How research findings have informed the development of strategies for all categories of service.  
  o The objectives and outcomes to be achieved by social welfare service providers over a period of five years.  
  o The implementation of developmental approach.  
  o Mainstreaming of cross-cutting issues such as disability, community-based services and family-based interventions.  
  o The implementation of a life-cycle approach.  
  o The inputs/resources, e.g. human resources, funding, infrastructure, required to achieve the objectives. |
| C-SP-2  | The social welfare sector should develop comprehensive intersectoral strategies for each life stage in the strategic focus areas | • The intersectoral strategy should strive for the delivery of a properly resourced, coordinated and managed social welfare service that addresses all life stages and all focus areas.  
• The intersectoral strategy should be adjusted and reviewed in consultation with the provinces and based on the compilation of provincial profiles.  
• The provincial profiles should be reviewed every three to five years. |
Generic Norms and Standards for Social Welfare Services

2.1.3. Collaborative Partnerships

Collaborative partnerships between social welfare sector stakeholders are set up to establish service delivery goals and to devise a joint plan of action for the achievement of the goals. The norms and standards provide for the establishment, support and governance of information sharing among service partners. The table below indicates the norms and standards applicable to collaborative partnerships.

<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| C-CP-1  | The social welfare sector should establish collaborative partnerships to address the needs of beneficiaries in terms of the strategic focus areas | • The DSD should develop effective and appropriate mechanisms to facilitate participation and consultation in policy development, planning and the evaluation of social programmes; intersectoral collaboration; the development of criteria for the financing of programmes and services; and the development of appropriate regulations.  
• Collaborative partnerships should be established at all levels of government and include:  
  o intersectoral forums;  
  o interdepartmental forums;  
  o social welfare forums integrated with other development forums.  
• Collaborative partnerships should be based on agreed goals, principles, strategies and priorities.  
• Forums should consist of a fair representation of relevant stakeholders.  
• The DSD should plan, develop and implement initiatives to support and sustain forums. |

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<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
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</table>
| C-SP-3  | The social welfare sector should prepare prescribed reports on strategic planning | • Reports on strategic plans should adhere to treasury guidelines and prescribed formats.  
• Reports should be standardised throughout the social welfare sector.  
• Social welfare service providers should report annually to the DSD on their performance in line with the strategic goals of the sector. |
<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| C-CP-1 | The social welfare sector should establish collaborative partnerships to address the needs of beneficiaries in terms of the strategic focus areas | • The DSD should develop effective and appropriate mechanisms to facilitate participation and consultation in policy development, planning and the evaluation of social programmes; intersectoral collaboration; the development of criteria for the financing of programmes and services; and the development of appropriate regulations.  
• Collaborative partnerships should be established at all levels of government and include:  
  o intersectoral forums;  
  o interdepartmental forums;  
  o social welfare forums integrated with other development forums.  
• Collaborative partnerships should be based on agreed goals, principles, strategies and priorities.  
• Forums should consist of a fair representation of relevant stakeholders.  
• The DSD should plan, develop and implement initiatives to support and sustain forums.  
• Interdepartmental and intersectoral project teams should be established to implement and manage national and provincial strategies.  
• A comprehensive referral system should be established to ensure that support from departments outside the social sector cluster is appropriately used.  
• Collaborative partnerships should enhance access to services and not create barriers.  
• Collaborative partnerships should function within the ambit of existing legislation. |
| C-CP-2 | Collaborative partnerships should include participation by beneficiaries and communities | • Collaborative partnership should meet the needs, conditions and circumstances of the community that is served.  
• Consultation with the community should be carried out with regard to the development and implementation of social welfare service legislation, policies and programmes.  
• The social welfare sector should involve communities in the planning and monitoring of services. |
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<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
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</thead>
</table>
| C-CP-3  | Collaborative partnerships should be formalised through memorandums of understanding and/or service level agreements | • The DSD should develop, negotiate and sign memorandums of understanding with collaborative partners for a period of two years.  
• The DSD should develop and sign service level agreements with social welfare service providers.  
• **Service level agreements should provide for:**  
  o deliverables required;  
  o budget requirements where funding is provided by the DSD;  
  o time frames for deliverables;  
  o the roles and responsibilities of each stakeholder;  
  o types of services to be rendered (they should be included in the activities part).  
• The DSD should monitor compliance with service level agreements and memorandums of understanding.  
• A tool to monitor and evaluate adherence to roles and responsibilities in collaborative partnerships should be developed and implemented by the DSD in consultation with other stakeholders.  
• Corrective measures should be put in place to deal with collaborative partners’ non-compliance with roles and responsibilities. |
| C-CP-4  | The social welfare sector should establish a system of information sharing among collaborative partners | • Service providers should disseminate the strategic plan to staff, to beneficiaries and their families, to the community and to other relevant stakeholders in the field.  
• Service providers should evaluate the outputs of internal and external communication regarding the dissemination of information on strategy, policy and services provided.  
• Service providers should develop communication strategies to ensure that all collaborative partners are able to carry a positive message about developmental social welfare services to the broader public.  
• Service providers should share good practices and results of innovation with other service providers in the field. |
2.1.4 Quality Assurance

An evaluation of the various aspects of service delivery should be carried out to help ensure that minimum standards of quality are achieved. The table below indicates the norms and standards applicable to quality assurance.

<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| C-QA-1  | The DSD should develop a Quality Assurance Framework for social welfare services | • A Quality Assurance Framework should be developed in consultation with social welfare service providers in the social welfare sector.  
• **The Quality Assurance Framework should cover:**  
  o compliance with the policy and legislative framework;  
  o compliance with the norms and standards for social welfare services;  
  o the value and performance as perceived by different stakeholders;  
  o the roles and responsibilities of different stakeholders in quality assurance;  
  o measurement criteria;  
  o measurement instruments;  
  o sources of data;  
  o methods of data collection and data analysis.  
  o Reporting and feedback systems should be established for quality assurance. |
| C-QA-2  | The DSD should develop an integrated quality monitoring system for social welfare services | • The quality monitoring system should be user friendly in terms of reporting and timely feedback.  
• **The quality monitoring system should include:**  
  o continuous monitoring of client satisfaction;  
  o complaint procedure registration and tracking;  
  o a monitoring and evaluation framework to track adherence to norms and standards.  
  o capacity development and an implementation plan. |
<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| C-QA-3  | The DSD should conduct quality assessments of all registered social welfare facilities and offices or centres. | • Quality assurance should be executed in accordance with the identified Quality Assurance Framework and the norms and standards for social welfare services.  
• Quality assessments should be carried out for all facilities and service offices as follows:  
  o Emerging facilities – annually,  
  o Established facilities – every two years  
  o Provincial, district and service offices – every two years,  
  o National offices – every three years.  
• The quality assessment should be developmental with the focus on quality improvement.  
• The quality assessment should result in a feedback report and the development of a quality improvement plan. |
| C-QA-4  | Social welfare service providers should develop norms and standards for the specific services they deliver. | • Norms and standard should describe:  
  o the service provided;  
  o the methodology to access the service (information about the service, admission of beneficiaries, initial assessment, service and activities planning, the contract, methodology for the interruption of the service provided);  
  o the rights of beneficiaries, the code of ethics, Batho Pele principles, Public Service Commission constitution principles, the relationship between beneficiaries and welfare service employees;  
  o complaint procedures, abuse protocol and protection of beneficiaries;  
  o general elements related to human resources (qualifications of employees; recruitment, retention, employment and promotion of employees; continuing education);  
  o elements related to organisation and administration (leadership, planning and development, evaluation and control, internal and external communication, partnership, data archiving). |
<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| C-QA-5  | Social welfare service providers should ensure continuous quality improvement | • Issues requiring quality improvement should be identified.  
• Quality improvement activities should be documented and reviewed.  
• Strategies required for continuous improvement should be identified and implemented. |
| C-QA-6  | Social welfare service providers should establish mechanisms for feedback from stakeholders | • Social welfare service providers should develop and implement mechanisms for collecting independent feedback from stakeholders on the provided services and the impact of the services.  
• Social welfare service providers should have mechanisms in place for independent complaint procedures.  
• Social welfare service providers should have mechanisms in place for ensuring confidentiality of beneficiary data. |
| C-QA-7  | The social welfare sector should establish a user-friendly complaint management system | • Guidelines for the reporting of incidents should be drawn up and made available to staff and users.  
• All staff should receive training on complaint procedures.  
**Guidelines for the reporting of incidents should clearly describe:**  
o roles and responsibilities;  
o the time frame for dealing with complaints;  
o the redress mechanism;  
o reporting and follow-up procedures;  
o acknowledgement of and feedback on complaints procedures;  
o record keeping.  
• All social welfare facilities and offices/centres should keep a register of all reported incidents that is easily accessible to all services that may require access to such information. |
| C-QA-8  | Social welfare service providers should be acquainted with the code of ethics and its implications for practice | • Mechanisms should be in place to eliminate or reduce workplace factors prohibiting or restricting adherence to the code of ethics.  
• Social welfare service providers should respect and ensure the dignity of beneficiaries.  
• Social welfare service providers should protect beneficiaries from all forms of abuse (physical, mental and financial) while promoting social justice. |
<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| C-QA-8 (Cont.) | Social welfare service providers should be acquainted with the code of ethics and its implications for practice | • Behaviour of staff should be governed by principles and values that embody aspects of confidentiality, accuracy, privacy and integrity and that respect the rights of those served. The principles should be clearly visible and communicated to all staff and beneficiaries.  
• Social welfare service providers should provide services in a safe manner and within a safe environment to ensure the physical security of staff and beneficiaries.  
• Social welfare service providers should comply with relevant health and safety legislation. |
| C-QA-9 | Social work services should be provided according to a manageable workload | • The ratio of a single occupation service delivery unit to the population should be:  
  o Rural area: 1:2 500  
  o Urban area: 1:5 000  
• The ratio of a multiple occupation delivery unit to the population should increase proportionately based on the size and diversity of the team:  
  o Rural area: 1:5 000  
  o Urban area: 1:10 000  
• Hereunder is an annexure on workload ratio: |
# Annexure A

## Scenario 1 (social worker): 80% of workload is allocated to casework

<table>
<thead>
<tr>
<th>Time allocations</th>
<th>Factors influencing</th>
<th>Caseload Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>• 160 hours per month</td>
<td>• No factors considered thus 160 hours per month</td>
<td>1:61 cases per month</td>
</tr>
<tr>
<td>• 8 hours of supervision</td>
<td></td>
<td>1:224 cases annually</td>
</tr>
<tr>
<td>• General administration of 16 hours per month</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Continuous professional development of 8 hours per month</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Scenario 2 (social worker): 80% of workload is allocated to casework

<table>
<thead>
<tr>
<th>Time allocations</th>
<th>Factors influencing</th>
<th>Caseload Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>• All time allocations indicated in scenario 1</td>
<td>• Nature of beneficiaries</td>
<td>1:44 cases per month</td>
</tr>
<tr>
<td></td>
<td>• Traveling</td>
<td>1:160 cases annually</td>
</tr>
</tbody>
</table>

## Scenario 3 (social worker): 80% of workload allocated to casework

<table>
<thead>
<tr>
<th>Time allocations</th>
<th>Factors influencing</th>
<th>Caseload Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>• All time allocations indicated in scenario 1</td>
<td>• Travelling</td>
<td>1:19 cases per month</td>
</tr>
<tr>
<td></td>
<td>• Court work</td>
<td>1:134 cases annually</td>
</tr>
</tbody>
</table>

## Scenario 4 (social worker): 50% of workload allocated to casework and 30% to group work

<table>
<thead>
<tr>
<th>Time allocations</th>
<th>Factors influencing</th>
<th>Caseload Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>• 80 hours per month available for casework</td>
<td>• No factors considered thus 160 hours per month</td>
<td>1:37 cases per month</td>
</tr>
<tr>
<td>• 48 hours per month available for group work</td>
<td></td>
<td>1:160 individuals in groups per month</td>
</tr>
</tbody>
</table>

## Scenario 5 (social worker): Workload allocated as 50% casework, 10% group work and 20% community work

<table>
<thead>
<tr>
<th>Time allocations</th>
<th>Factors influencing</th>
<th>Caseload Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>• 80 hours per month allocated to casework</td>
<td>• No factors considered thus 160 hours per month</td>
<td>1:37 cases per month</td>
</tr>
<tr>
<td>• 16 hours per month allocated to group work</td>
<td></td>
<td>1:135 cases annually</td>
</tr>
<tr>
<td>• 32 hours per month allocated to community work</td>
<td></td>
<td>1:40 individuals in group per month</td>
</tr>
<tr>
<td></td>
<td></td>
<td>175 individuals in groups annually</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Number of people reached through community work to be determined by the size of target community</td>
</tr>
</tbody>
</table>
### Scenario 6 (social auxiliary worker): Workload allocation where 80% is allocated to basic counselling and support to families
- 160 hours per month
- 8 hours of supervision
- General administration of 16 hours per month
- Continuous professional development of 8 hours per month
- No factors considered thus 160 hours per month
- 1:61 cases per month
- 1:224 cases annually

### Scenario 7 (social auxiliary worker): Workload allocation where 80% is allocated to basic counselling and support to families
- Same time allocation as indicated in scenario 1
- Travelling
- Nature of beneficiaries
- 1:44 cases per month
- 1:160 cases annually

### Scenario 8 (social work supervisor): 65% of time allocated for supervision of direct social welfare services
- Time allocation
  - 160 hours per month
  - 20% administrative tasks
  - 10% professional relations
  - 5% professional development
- No factors considered thus 160 hours per month
- 1:13 supervisees

### Scenario 9 (social work supervisor): Supervision only where 65% of time allocated for supervision of direct social welfare services
- Time allocation similar to scenario 8
- Travelling
- 1:10 supervisees

### Scenario 10 (social work supervisor): 65% of time allocated for supervision and 50% is allocated to casework
- Time allocation similar to scenario 8
  - 80 hours allocated to casework
  - 24 hours allocated for supervision of direct services
- No factors considered thus 160 hours per month
- 1:3 social workers
- 1:44 cases per month
- 1:160 cases annually

### Scenario 11 (social work supervisor): 20% of time allocated for supervision and 50% for management of social welfare services
- 24 hours allocated for supervision
- No factors considered thus 160 hours per month
- 1:3 social workers
## Child and Youth Care Work Workload Ratios

### Scenario 1 (child and youth care worker): 85% of time allocated to developmental care and support

<table>
<thead>
<tr>
<th>Task</th>
<th>Time Allocation</th>
<th>Cases per Month</th>
</tr>
</thead>
<tbody>
<tr>
<td>General administration</td>
<td>16 hours</td>
<td>47 cases</td>
</tr>
<tr>
<td>Continuous professional development</td>
<td>8 hours</td>
<td>257 cases</td>
</tr>
<tr>
<td>Total</td>
<td>160 hours</td>
<td>304 cases</td>
</tr>
</tbody>
</table>

### Scenario 2 (child and youth care worker): 85% of time allocated for developmental care and support

<table>
<thead>
<tr>
<th>Task</th>
<th>Time Allocation</th>
<th>Cases per Month</th>
</tr>
</thead>
<tbody>
<tr>
<td>Travelling</td>
<td>35 cases</td>
<td>194 cases</td>
</tr>
</tbody>
</table>

### Scenario 3 (child and youth care worker): 45% of time is allocated for developmental care and support and 40% to family work

<table>
<thead>
<tr>
<th>Task</th>
<th>Time Allocation</th>
<th>Cases per Month</th>
</tr>
</thead>
<tbody>
<tr>
<td>Developmental care and support</td>
<td>25 cases</td>
<td>138 cases</td>
</tr>
<tr>
<td>Family work</td>
<td>23 cases</td>
<td>125 cases</td>
</tr>
<tr>
<td>Total Ratio</td>
<td>48 cases</td>
<td>263 cases</td>
</tr>
</tbody>
</table>

### Scenario 4 (child and youth care work): 40% of time allocated for developmental care and support, 20% for behaviour management and support and 25% for family work

<table>
<thead>
<tr>
<th>Task</th>
<th>Time Allocation</th>
<th>Cases per Month</th>
</tr>
</thead>
<tbody>
<tr>
<td>Developmental care and support &amp; family work</td>
<td>21 cases</td>
<td>114 cases</td>
</tr>
<tr>
<td>Family work</td>
<td>14 cases</td>
<td>76 cases</td>
</tr>
<tr>
<td>Behaviour management and support</td>
<td>21 cases</td>
<td>114 cases</td>
</tr>
<tr>
<td>Total Ratio</td>
<td>56 cases</td>
<td>304 cases</td>
</tr>
</tbody>
</table>
### Care Giver Workload Ratios

**Scenario 1 (care giver): 80% time allocated for the provision of care and support**

<table>
<thead>
<tr>
<th>Time allocation</th>
<th>No factors considered therefore 160 hours per month</th>
<th>1: 26 cases per month</th>
</tr>
</thead>
<tbody>
<tr>
<td>32 hours per month for liaison with families</td>
<td></td>
<td></td>
</tr>
<tr>
<td>One day a month for continuous training and development</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Scenario 2 (care giver): 80% time allocated for provision of care and support**

<table>
<thead>
<tr>
<th>Similar time allocation as in scenario 1</th>
<th>Travelling</th>
<th>1: 19 cases per month</th>
</tr>
</thead>
</table>

**Scenario 3 (care giver): 70% time allocated for provision of care and support and 20% for development of care plans**

<table>
<thead>
<tr>
<th>Similar time allocation as in scenario 1</th>
<th>No factors considered therefore 160 hours per month</th>
<th>1: 22 cases per month</th>
</tr>
</thead>
<tbody>
<tr>
<td>32 hours allocated for development of care plans</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
2.1.5 Monitoring and Evaluation

Monitoring and evaluation are essential for measuring the effectiveness of social welfare service delivery and for dealing with issues of non-performance issues. The norms and standards provide for the development and implementation of monitoring and evaluation frameworks, guidelines and tools. The table below indicates the norms and standards applicable to monitoring and evaluation.

<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| C-M&E-1 | All social welfare service providers should monitor and evaluate social welfare services and programmes | • Social welfare services should be monitored and evaluated for compliance with:  
  o norms and standards for developmental social welfare services;  
  o existing legislation and policies;  
  o national and provincial plans;  
  o district plans.  
• Social welfare service delivery should be monitored and evaluated as follows:  
  o At an operational level on a quarterly basis.  
  o Organisational performance should be monitored and evaluated annually.  
  o Business plans should be evaluated annually.  
  o Social welfare service providers should ensure independent reviews of systems and procedures in accordance with agency policies in order to achieve the targeted results. |
| C-M&E-2 | National and provincial departments should establish a comprehensive and quality monitoring and evaluation system for all social welfare services | • The DSD should do the following:  
  o Develop procedures and guidelines for monitoring and evaluating social welfare services.  
  o Develop monitoring and evaluation frameworks.  
  o Develop a uniform monitoring and evaluation tool aligned to business processes.  
  o Review monitoring and evaluation frameworks every three to five years.  
  o Review monitoring and evaluation tools annually.  
• The DSD should annually publish monitoring and evaluation reports on social welfare service delivery and provide  
• Social welfare service providers should establish internal rules and procedures for analysing client satisfaction. |
<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| C-M&E-2  | National and provincial departments should establish a comprehensive and quality monitoring and evaluation system for all social welfare services | • Feedback to social welfare service providers.  
• The following key performance indicators should be measured:  
  o Turnaround times from reporting a problem until the implementation of a solution.  
  o Client satisfaction.  
  o Complaints registered vs. complaints resolved. |
| C-M&E-3  | Social welfare service providers should involve beneficiaries and other relevant stakeholders in the monitoring and evaluation process | • Social welfare service providers should establish mechanisms for collecting independent feedback from beneficiaries and other relevant stakeholders. |
| C-M&E-4  | Social welfare service providers should report on social welfare service delivery | • The DSD should establish a uniform monitoring and evaluation reporting system.  
• Monitoring and evaluation reports should be compiled and submitted to the DSD annually in the required format.  
• The provincial directorates should submit quarterly progress reports to the appropriate national directorates of the DSD.  
• The quarterly report should include the following information:  
  o Achievement of provincial strategic objectives  
  o Actual vs. planned budget spent  
  o Challenges and remedial strategies  
• Quarterly reporting should be carried out through the existing reporting management structures.  
• Social welfare service providers should protect the privacy and personal data of beneficiaries when reporting.  
• Timely feedback should be provided on reports submitted. |
2.2. Organisational Norms and Standards

2.2.1 Funding

Funding concerns the provision and allocation of sufficient financial resources to meet the demands associated with rendering social welfare services. The table below indicates the norms and standards applicable to funding.

<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| O-F-1   | The social welfare sector should ensure sustainable funding to registered service providers | • Sufficient financial resources should be considered a precondition for the provision of adequate quality social welfare services.  
• Sustainable funding should be in line with the overall objectives of social welfare services enabling service providers to provide social welfare services within the required infrastructure. |
| O-F-2   | The DSD should ensure the equitable allocation of funds for the provision of social welfare services | • A funding model for the provision of social welfare services should, in consultation with stakeholders, be developed and implemented for all services.  
• **Equitable provision of funding should be based on:**  
  o national strategic priorities;  
  o the rights of the citizens;  
  o the needs of communities;  
  o approved programmes.  
• The funding of social welfare services should comply with the PFMA Regulations  
• Framework as prescribed by the National Treasury.  
• The evaluation of requests for funding should be done according to the financial framework for funding of social welfare services and the policy on financial awards. |
| O-F-3   | Social welfare service providers should plan for securing funding for the services provided and should manage their finances in compliance with the existing legal requirements | • Social welfare service providers should provide a detailed costing and budgeting for the respective calendar year containing the planned expenses and income required for delivering the services.  
• Social welfare service budgets should be aligned with national goals, the rights of citizens and the needs of the community. |
2.2.2 Business Planning and Budgeting

Business planning and budgeting is necessary for the achievement of strategic social welfare service objectives. The table below indicates the norms and standards applicable to business planning and budgeting.

<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| O-F-3 (Cont.) | Social welfare service providers should plan for securing funding for the services provided and should manage their finances in compliance with the existing legal requirements | • Social welfare service providers should draft and publish annual reports on their economic performance, which should give an account of income and expenses for securing the services in the particular year.  
• Social welfare service providers should submit the annual financial statements of the previous year with their application for funding.  
• Social welfare service providers should comply with the South African Statement of Generally Accepted Accounting Practice.  
• Social welfare service providers should set and apply internal rules for accepting donations.  
• All donations should be declared and reported on annually to the DSD. |
| O-F-4 | Social welfare service providers funded by government should manage their finances in compliance with the existing legal requirements | • Social welfare service providers should submit an annual financial statement of the previous year with their application for funding.  
• Social welfare service providers should comply with the South African Statement of Generally Accepted Accounting Practice.  
• Social welfare service providers should set and apply internal rules for accepting donations.  
• All donations should be declared and reported on annually to the DSD. |

<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| O-BP-1 | The DSD should coordinate social welfare service delivery in communities | • The DSD should identify the need for social welfare facilities and offices or centres in communities in collaboration with existing social welfare service providers.  
• The DSD should map existing social welfare service providers and analyse the gap in service delivery. |
<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| O-BP-2 | Social welfare service providers should be accountable for organisational performance | • Social welfare service providers should have mechanisms in place for carrying out periodic and independent reviews of their financial and non-financial results including participatory review mechanisms. The mechanisms should also make relevant information available to the public.  
• Social welfare service providers should establish and document their annual planning and review process.  
• Social welfare service providers should have mechanisms in place for systematic, continuous improvement. |
| O-BP-3 | Social welfare service providers should develop non-discriminatory policies and practices | • Non-discriminatory policies and practices should be developed, implemented and annually reviewed.  
• **Client-focused practices should be encouraged and should ensure that:**  
  o clients participate in decision-making processes;  
  o clients have access to information.  
• Processes for addressing client needs and/or preferences should be in place. |
| O-BP-4 | Social welfare service providers should define their operational plans and budgets for rendering social welfare services | • Social welfare service providers should annually develop operational plans that cover all life stages, services and strategic focus areas.  
• **The operational plans should define:**  
  o the services and programmes to be rendered;  
  o the target group;  
  o the area of operation;  
  o the financial and non-financial resource requirements.  
• **Social welfare service providers should develop operational plans that are in line with:**  
  o existing policies and legislation;  
  o national and provincial strategic plans.  
• Operational plans should be developed in consultation with staff.  
• Social welfare service providers should draft a business plan in the prescribed format.  
• Social welfare service providers should report on the results of service delivery according to the business plan and set goals on a quarterly basis. |
### 2.2.3 Administration

The norms and standards provide for the registration, approval and management of social welfare service providers, facilities and offices. **The table below indicates the norms and standards applicable to the administration involved in rendering social welfare services.**

<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| O-A-1   | Social welfare service providers should be managed in a transparent, effective and structured manner | • Social welfare service providers should clarify the contributions and interrelations of those who manage, design, deliver, support and evaluate the provision of a service.  
• Social welfare service providers should record the outcomes of service delivery plans.  
• Social welfare service providers should record the continuous evaluation of services by the beneficiaries of the services.  
• Social welfare service providers should demonstrate proactive provision of information to beneficiaries. |
| O-A-2   | Social welfare care and residential facilities and offices/centres should be established based on a needs assessment and a community profile. All non-governmental facilities and offices/centres should have a constitution and founding document. A register of all beneficiaries should be kept at every social welfare facility. | • Social welfare facilities and offices/centres should be established based on a needs assessment and a community profile.  
• All non-governmental facilities and offices/centres should have a constitution and founding document.  
• A register of all beneficiaries should be kept at every social welfare facility. |
<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| O-A-2 (Cont.) | Social welfare care and residential facilities and offices/centres should be established, managed and operated in accordance with relevant regulatory requirements | • The management and operations of all social welfare facilities should be in accordance with the policy and legislative framework.  
• Individual files should be kept for each individual, group or community beneficiary of welfare services.  
• Individual files should be kept for all staff members, including volunteers, at a social welfare facility.  
• Social welfare facilities and offices/centres should be monitored quarterly.  
• The DSD should inspect social welfare facilities and offices or centres annually.  
• The facility manager should ensure that efficient and effective governance systems, including utilisation of personnel, are implemented.  
• The facility manager should establish processes to ensure accountability to the organisation in all respects. |
| O-A-3 | All social welfare facilities and offices/centres should be approved and registered with the DSD | • The application for registration with the DSD should be made in the prescribed manner.  
• The application for registration of social welfare facilities with the DSD should contain certain minimum information:  
  o The name of the social service.  
  o A description of the activities and methodologies used.  
  o The period for providing the service.  
  o The starting date for the social service.  
  o The head office of the service provider.  
  o The field of activity.  
  o A description of the target group (numbers of users, socioeconomic characteristics).  
  o The methodology for selecting the beneficiaries.  
  o The methodology for involving the beneficiaries in the activities provided.  
  o The methodology for periodically controlling the quality of service.  
  o The methodology for the assessment of beneficiaries’ satisfaction.  
  o A description of the human resources involved in providing the service. |
<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
<tbody>
<tr>
<td>O-A-3</td>
<td>All social welfare facilities and offices/centres should be approved and registered with the DSD</td>
<td>• The provincial department (or other designated authority) should communicate the outcome of the application for registration post-adjudication or consideration.</td>
</tr>
<tr>
<td>O-A-4</td>
<td>The DSD should keep a database of all social welfare facilities</td>
<td>• A database of all registered and unregistered social welfare facilities should be developed and maintained per province, district and municipality and should be accessible to stakeholders, service providers and beneficiaries. • The database should be updated and published by the DSD annually.</td>
</tr>
<tr>
<td>O-A-5</td>
<td>Social welfare service providers should ensure that policies, guidelines and procedures are documented and accessible</td>
<td>• Policies, guidelines and procedures should be documented by social welfare service providers. • Social welfare service providers should ensure that the policies, guidelines and procedures are available to all staff, clients and other relevant parties. • Social welfare service providers should review and update policies, guidelines and procedures as needed. • Social welfare service providers should ensure that policies, guidelines and procedures conform to relevant legislation.</td>
</tr>
<tr>
<td>O-A-6</td>
<td>Social welfare service providers should use control documents that have been adjusted to the services rendered at the specific organisation</td>
<td>• Social welfare service providers should ensure that the following control documents are in use: o Beneficiary guide (where the service is described). o Written procedures for the admission of beneficiaries for the service, the initial and on-going assessment, the interruption of the service provided the relationship between employees and beneficiaries, the registration and settlement of complaints, the notification of incidents. o Beneficiary assessment document. o Code of beneficiaries’ rights. o Register for complaints. o Individualised plans and programmes (containing objectives, actions to be carried out by the beneficiaries and also by the multidisciplinary team, results to be achieved). o Self-assessment report on the implementation of quality standards. o Progress report.</td>
</tr>
<tr>
<td>Ref No.</td>
<td>Norm</td>
<td>Standards</td>
</tr>
<tr>
<td>---------</td>
<td>-----------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| O-A-7   | Registered social welfare service providers should adhere to mandatory conditions to ensure quality service delivery | • The following minimum mandatory conditions should be adhered to by all registered social welfare service providers:  
  - The welfare service provider should be a legally constituted institution/organisation.  
  - The mission and the objectives of the organisation should include respect for human rights and international and national legislation.  
  - Adequate numbers of appropriately trained staff should be provided.  
  - The organisation should have the necessary financial and material resources as well as the capacity to attract external financing in order to provide social welfare services.  
  - Social welfare service providers should respect the specific quality standards for social welfare services.  
  - Social welfare services should be provided in a non-discriminatory manner.  
  - Internal procedures for the assessment of services should be in place.  
  - Procedures for the assessment of beneficiary satisfaction should be developed.  
  - Procedures for the assessment of staff satisfaction should be developed. |
2.2.4 Research

The table below indicates the norms and standards applicable to research in terms of social welfare service delivery.

<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| O-R-1   | The social welfare service sector should assess and monitor social phenomena in order to inform the development of policy and legislation | • The DSD should develop guidelines for research in the social welfare sector in collaboration with stakeholders in the sector.  
• Social service practitioners should conduct research that is consistent with the guidelines on ethical conduct in research involving human beings.  
• The social welfare sector should liaise with academic and research institutions to access research data on the sector.  
• Social service practitioners should conduct research that is directed at the resolution of social work problems in practice and in policy.  
• The DSD should   
  • compile and publish a report on research findings with recommendations at least once a year;  
  • annually review and publish effective communication strategies on researched social phenomena.  
• The social welfare sector should use research findings to inform the development of policies and guidelines.  
• Communities should be consulted once a year to support the timely identification of social risks.  
• Poverty maps and social indicators should be used to identify and select priority areas for service delivery and monitoring purposes.  
• Monitoring of social phenomena and the effectiveness of policies should be carried out.                                                                 |
| O-R-2   | Research should inform the development of services, programmes and interventions | • Social service practitioners should identify the social welfare needs of the community through research and the assessment of the social environment.  
• Social welfare practitioners should use research to inform community and beneficiary profiling.                                                                                                                   |
<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| O-R-3  | Social service practitioners should base practice on evidence-based research in the area of practice | • Social service practitioners should share research outcomes with colleagues in related sectors.  
• Social welfare practitioners should conduct evaluative research to identify best practices.  
• Social service practitioners should research, analyse, evaluate and apply current knowledge of best social work practice.  
• Social welfare practitioners should incorporate the results of social research undertaken in their communities in a way that ensures that the social work service they deliver is as relevant and appropriate as possible.  
• Resources required for practice research should be identified and allocated.  
• Research should be undertaken as an integral part of ongoing practice.  
• The outcomes of practice and quality improvement research should be implemented. |
| O-R-4  | Social service practitioners’ research activities should be based on a solid understanding of research principles and research methods | • Social welfare practitioners should regularly update practice knowledge and skills through a range of professional development activities such as systematic reading of research literature and the attendance of conferences, seminars and workshops.  
• Social welfare practitioners should demonstrate skills in searching knowledge for practice including skills in searching databases and other library resources.  
• Social welfare practitioners should demonstrate knowledge of a range of specific research methods, their limitations and their application.  
• Social welfare practitioners should submit research findings to the scrutiny of peers by writing research reports for publication in professional journals and by presenting research findings at appropriate professional forums. |
### 2.2.5 Programme Development

The table below indicates the norms and standards applicable to programme development.

<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
</tr>
</thead>
<tbody>
<tr>
<td>O-PD-1</td>
<td>The social welfare sector should coordinate programme development to meet the social welfare needs of all beneficiaries</td>
</tr>
<tr>
<td></td>
<td><strong>Standards</strong></td>
</tr>
<tr>
<td></td>
<td>• Social welfare sector programmes should be aligned with existing policies, legislation, strategic priorities and funding.</td>
</tr>
<tr>
<td></td>
<td>• The social welfare sector should develop programmes in line with the Social Welfare Policy Framework and specifically adhere to the developmental approach.</td>
</tr>
<tr>
<td></td>
<td>• Programmes should be directed at the needs and rights of the beneficiaries in each life stage.</td>
</tr>
<tr>
<td></td>
<td>• Programme development should be based on research findings.</td>
</tr>
<tr>
<td></td>
<td>• Programme development should be informed by the assessment of the social, cultural and economic environment.</td>
</tr>
<tr>
<td></td>
<td>• Programme development should address all levels of service delivery.</td>
</tr>
<tr>
<td></td>
<td>• Programmes should be reviewed annually taking the strategic plan and medium-term expenditure into consideration.</td>
</tr>
<tr>
<td></td>
<td>• Mainstreaming of cross-cutting areas should be taken into account in the development of social welfare programmes.</td>
</tr>
</tbody>
</table>

| O-PD-2  | The social welfare sector should develop and implement guidelines for the delivery of social welfare programmes |
|         | **Standards** |
|         | • Guidelines should indicate the approach and procedure to be followed when delivering programmes for each life stage and focus area. |
|         | • Guidelines should be reviewed every three to five years. |
|         | • Mainstreaming of cross-cutting areas should be taken into account in the development of guidelines for the delivery of social welfare programmes. |
### 2.2.6. Human Resources

The table below indicates the norms and standards applicable to the human resources required for social welfare service delivery.

<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| O-HR-1  | The DSD as well as social welfare service providers should develop a human resource model for social welfare services to guide the service providers | • The human resource model should provide for the following:  
  o The different occupations that deliver social welfare services.  
  o The roles and responsibilities of each occupation.  
  o The competencies of each occupation.  
  o The qualifications of each occupation.  
  o The registration of each occupation.  
• The human resource model should be in line with existing policies and legislation. |
| O-HR-2  | The human resource component should be based on either a single occupation social welfare service delivery unit or a multiple occupations or team social welfare service delivery unit | • The human resource component for a single occupation social welfare service delivery unit should consist of the following:  
  o A social service practitioner  
  o Administrative support  
  o A supervisor  
  o A manager  
• The human resource component for multiple occupations or team social welfare service delivery unit should consist of the following:  
  o A team of different social welfare practitioners such as social workers, social auxiliary workers, child and youth care workers, and community development practitioners.  
  o Administrative and other support.  
  o A supervisor.  
  o A social services manager. |
| O-HR-3  | Social welfare service providers should recruit and appoint appropriately qualified practitioners to ensure the delivery of quality social welfare services | • Social welfare service providers should determine the specific profile for each post.  
• Social welfare service providers should recruit appropriate social service practitioners.  
• Social welfare practitioners should be registered with the relevant regulatory professional body. |
<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
</tr>
</thead>
</table>
| O-HR-4 | Social welfare service providers should develop human resource management policies to guide the management of human resources in the sector | • The policies should provide for:  
  o recruitment and retention of staff;  
  o training and development;  
  o a code of conduct;  
  o performance management;  
  o organisational structures with descriptions of the powers and responsibilities of individual employees. |
| O-HR-5 | Social welfare service providers should provide practitioners with professional support and development | • Organisational training requirements should be identified and aligned with strategic objectives.  
• Training requirements should be reviewed annually.  
• Social welfare practitioners should have a personal development plan that is aligned with the organisational development plan.  
• The development plan should be reviewed on an annual basis.  
• Social welfare service providers should support the health and mental wellness of practitioners through the provision of debriefing sessions and other appropriate programmes. |
| O-HR-6 | Social welfare service providers should obtain and maintain adequate staff levels and acceptable working conditions | • Social welfare service providers should review staffing level requirements annually.  
• The vacancy rate for all critical posts should not exceed 5%.  
• Social welfare service providers should consistently endeavour to establish and maintain required staffing levels by filling vacant posts within six months.  
• Social welfare service providers should ensure that working conditions are in line with the requirements of the Occupational Health and Safety Act.  
• Social welfare service providers should have clear guidelines on performance agreements, working conditions and a code of conduct. |
| O-HR-7 | Social welfare service providers should promote effective teamwork and communication | • Effective and accountable communication systems should be established that are relevant to the organisation’s internal and external business.  
• The value of teamwork should be promoted in the social welfare service and across the organisation.  
• Strategies for effective teamwork should be identified and implemented. |
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<th>Ref No.</th>
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| O-HR-8  | Social welfare service providers should make consultation and supervision available to social welfare service practitioners | • Supervisors should be appointed in terms of the human resource model and the Framework for Social Welfare Services.  
• Supervision and consultation responsibilities should be allocated based on seniority in the organisation.  
• Newly qualified practitioners should be supervised for a minimum of two years.  
• **Span of control should be limited to the following ratios:**  
  o Social work supervisor: 65% allocated for supervision of direct social welfare services = 1:13  
  o Social work supervisor: 65% allocated for supervision of direct social welfare services and travelling is considered = 1:10  
  o Social work supervisor: 50% allocated to casework/management of social welfare services = 1:3 |
| O-HR-9  | The DSD should create an enabling environment for human resource development | • Human resource development guidelines should be developed in consultation with the SACSSP and the social services sector.  
• Training providers should register all social service training activities for CPD points with the SACSSP.  
• Social welfare service practitioners should attend a CPD activity on the code of ethics every second year.  
• Social welfare service practitioners should attend a CPD activity on changes in the policy and legislative framework every second year.  
• Training providers should keep a database of all social welfare practitioners who have attended training. |
### 2.2.7 Infrastructure

The table below indicates the norms and standards applicable to the provision of infrastructure for rendering social welfare services.

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<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
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</table>
| O-Inf-1 | The social welfare sector should make provision for facilities to render social welfare services in all communities | • All service offices or points should be within a 20 km radius.  
• Social welfare service providers should use, where possible, alternative existing infrastructures such as municipal offices, police stations, clinics and schools.  
• The DSD should establish a one-stop centre where critical alternative infrastructure is not within close proximity.  
• The DSD should develop and review its framework for the allocation/deployment of service offices in all communities every three years.  
• The DSD should make available alternative infrastructure facilities, such as mobile service points, where there is a lack of permanent structures.  
• The social welfare sector should make infrastructure facilities accessible to beneficiaries in need of services in compliance with legislation and departmental policies on access for people with disabilities, older people and children. |
| O-Inf-2 | Facilities and service offices should be established and maintained in accordance with the applicable regulatory requirements | • All social welfare service offices and facilities should be branded and signposted indicating operating hours.  
• All infrastructure facilities should comply with relevant legislation and regulatory requirements to ensure that they are adequate and comply with health and safety standards for users, workers and volunteers.  
• The DSD should develop and implement a policy on minimum infrastructure planning requirements in collaboration with the social welfare sector, the Department of Public Works and all other relevant stakeholders. |
<p>| O-Inf-3 | The social welfare sector should enhance the quality of facilities that provide specific services and meet needs | • The DSD should develop guidelines for specific infrastructure for specific services and/or needs at facilities and offices/centres. |</p>
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<tr>
<th>Ref No.</th>
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| O-Inf-4| Facilities and service offices should be established and maintained in accordance with the applicable regulatory requirements to ensure that they are adequate in terms of capacity, the nature of the services delivered and users' needs | • The construction of facilities should comply with the minimum standards for national building regulations.  
• Service providers should keep facilities where services are provided clean and free of offensive smells.  
• Facilities should ensure that rooms used for confidential service provision conform to existing norms of confidentiality.  
• **The environment and equipment should be effective and efficient and, in particular, provide:**  
  o wheelchair accessibility;  
  o an environment with sufficient space and privacy;  
  o toilet facilities;  
  o lighting and a harmonious atmosphere.  
• Facilities should be adequate in terms of capacity, the nature of the service provided and the needs and interests of users. |
| O-Inf-5| All service offices should have an emergency plan in place            | • Social welfare service providers should anticipate possible accident and emergency situations and devise contingency plans.  
• Users and employees should be familiar with the procedures in the event of an accident or emergency.  
• Records should be kept on the course and solution of emergency and accident situations in respect of temporary shortages of staff, natural disasters and epidemics. |
| O-Inf-6| Service offices should have suitable infrastructure                 | • **Every service office should provide the following:**  
  o Office space in compliance with the standards set by the Department of Public Works.  
  o A dedicated reception area.  
  o Dedicated waiting areas.  
  o Dedicated consultation rooms that are enclosed and permit confidential consultations with clients.  
  o Clear signage inside and outside buildings to indicate different facilities.  
  o Access for persons with disabilities.  
  o Kitchen area.  
  o Separate ablution facilities for staff and the public.  
  o Ablution facilities for people with disabilities.  
  o Security.  
  o Secure Registry for Case files. |
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<th>Ref No.</th>
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| O-Inf-7 | A security management environment should be created at all facilities in accordance with national guidelines on basic security requirements | • The DSD should develop and maintain national guidelines on security at facilities including asset management and protection of clients and personnel.  
• Provinces should implement and review security systems annually according to the national guidelines.  
• Where premises are not walled, a fence and lockable gate should be erected around the premises.  
• Panic buttons/intercom systems should be installed and kept in working condition at all times and linked to the security desk.  
• Security personnel regulations should be established including the following:  
  o At least one security officer should be on duty during office hours at each service office.  
  o The number of security officers should be determined by the size of the facility and the number of clients it serves.  
  o At least one security officer should be on duty when services are rendered from a mobile service point in rural areas.  
  o Security officers should be informed about the services rendered by the facility and their roles clearly defined to ensure appropriate interaction with clients. |
| O-Inf-8 | Social welfare care facilities, residential facilities and offices should keep records of structural compliance as required by local municipalities | • Social welfare facilities and offices/centres should display certification required by the local municipality and the DSD in accordance with health and safety regulations. |
2.2.8 Information Technology

The table below indicates the norms and standards applicable to information technology in respect of social welfare services.

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<thead>
<tr>
<th>Ref No.</th>
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| O-IT-1  | Information technology plans for national and provincial departments should be aligned with strategic objectives | • An integrated information technology plan should be developed; maintained and reviewed every three to five years in terms of the strategic plan to ensure that the required information technology infrastructure is available at all levels of service delivery.  
• The DSD should monitor implementation of the information technology plan. |
| O-IT-2  | A generally accessible database should be established and maintained of all relevant documents in the policy and legislative framework | • The DSD website should be updated as and when new policies and legislation are promulgated.  
• A database of all relevant policies and legislation should be established and reviewed quarterly. |
| O-IT-3  | The social welfare sector should use an integrated document management system | • The DSD should develop a policy on document management.  
• The DSD should develop and implement a document management system for social welfare services across the welfare sector. All documentation and physical information should be securely kept and properly referenced in terms of services, processes, process enablers and process controls.  
• The document management system should be based on the following principles  
  o Configuration management  
  o Standardisation  
  o Version control  
  o Review control  
  o Promulgation  
  o Accessibility to all departments and stakeholders. |
| O-IT-4  | An integrated information management system (IMS) should be established and maintained | • The following minimum functionality of the integrated information management system should be available.  
  o A service provider database, including the provider’s office infrastructure and resources, should include: |
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| O-IT-4 (Cont.) | An integrated information management system (IMS) should be established and maintained | - service provider contact details;  
- specific services rendered by the provider;  
- areas and venues from where the services are rendered;  
- information on who rendered the services (social workers, volunteers, physiologists);  
- information on training received including accreditation (annual);  
- objectives and target groups (client’s base).  
  o A record of services rendered including details of the intervention.  
  o A volunteer database should include  
    - volunteer contact details;  
    - training received;  
    - specific services provided (scope, area, venue);  
    - target groups (client’s base).  
  o A client transaction tracking database should reflect the proportion of cases processed (including intakes, referrals, screenings, assessments, interventions, evaluations over any given period of time).  
  o A database of beneficiaries (including their identity numbers and personal details as well as a history of services rendered).  
  o A database of community profiles/needs assessments. |
| O-IT-5 | The DSD should establish an early warning system to report on social risks based on the assessment of the social environment and management information | • The DSD should identify potential social risks.  
• Potential social risks should be published on the national website once confirmed.  
• Provincial departments should notify the DSD in writing on any social risks identified in the provinces. |
| O-IT-6 | Information on social welfare services should be published on official government websites | • The DSD should ensure that information on all available social welfare services is published and maintained on the official website.  
• The website should be user friendly and easily accessible to clients, employees and stakeholders.  
• The website should provide at least the following information. |
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<th>Ref No.</th>
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<tr>
<td>O-IT-6</td>
<td>Information on social welfare services should be published on official government websites</td>
<td>o A list of all social welfare services provided by the DSD and other service providers per target group;</td>
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<tr>
<td></td>
<td>(Cont.)</td>
<td>o A list of all registered providers who provide social welfare services with their contact details and their areas of specialisation.</td>
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<td>o Links to other websites providing information on the well-being of people.</td>
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<td>o Appropriate application forms, which should be made available in electronic format.</td>
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<tr>
<td>O-IT-7</td>
<td>All service providers’ facilities should promote safe, professional and quality collection and processing of client information in compliance with existing legislation</td>
<td>• The social welfare service provider should specify which personal data it needs from the client so that the services provided can be safe, professional and of high quality.</td>
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<td></td>
<td></td>
<td>• The social welfare service provider should process only the personal data of clients deemed necessary for the delivery of safe, professional and quality services.</td>
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<td></td>
<td>• The internal rules and information technology security systems should manage the access of the designated employees of the service provider so that they can effectively use the personal data for the purpose of providing safe, professional and quality services.</td>
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<td>• The facility should create security profiles that allow for the processing of personal data that comply with the existing legal prescripts.</td>
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<td>• If required by the nature of the service or clients themselves, the service provider should ensure the anonymous filing of individual clients’ information.</td>
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<td>• Documents on services provided to individual clients should be archived for an adequate period of time and in accordance with applicable legislation.</td>
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<tr>
<td>O-IT-8</td>
<td>A national information call centre should be established</td>
<td>• The DSD should establish a national social welfare service call centre.</td>
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<td>• The call centre should be linked to the national database of service providers for queries, lodging complaints and disciplinary requirements.</td>
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<td></td>
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<td>• The call centre should be linked to existing provincial call centres.</td>
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<td>• A toll-free number should be available to ensure access to all those requiring information.</td>
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| O-IT-8  | A national information call centre should be established (Cont.) | • The call centre should be operational 24 hours a day and seven days a week.  
• The call centre should be appropriately staffed and should have at least one qualified social worker on duty at all times to ensure that callers are assisted or referred in the best possible manner. |
| O-IT-9  | All social welfare practitioners should be provided with sufficient IT equipment and the means to render efficient and effective services | • All social welfare professionals should have access to information technology equipment so that they can effectively deliver on their mandates. The technology should include at least the following:  
  o IT hardware and software (depending on the specific requirements and nature of the services rendered)  
  o Wireless connectivity  
  o Remote access  
  o Memory sticks  
  o Subsidised mobile phones |
| O-IT-10 | Social welfare information technology services should be supported by a technical IT support team | • An Information Technology Framework should be developed and maintained by the  
• DSD to guide/determine the following:  
  o Technology standards  
  o Systems and technology portfolio catalogues  
  o Location and platform decomposition diagrams  
  o Welfare service delivery process diagrams (specification rules, forms, delegations, authorisations)  
  o Networking computing/hardware diagrams, backups, recovery  
  o Communications engineering diagrams (protocols, access registration, data security, data migration)  
  o Fault-reporting procedures |
2.2.9 Training and Development

The table below indicates the norms and standards applicable to the training and development of practitioners.

<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
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</table>
| O-T&D-1 | All social welfare professionals should attend workplace training programmes and in-service training | • Social welfare service providers should conduct structured induction programmes for all newly appointed practitioners within three months of appointment.  
• Social welfare service providers should provide workplace and in-service training programmes for all practitioners. |
| O-T&D-2 | Social welfare service providers should ensure continuous training and development of social welfare practitioners | • Social welfare service providers should conduct an annual training and development needs assessment.  
• Social welfare service providers should develop a training and development plan and identify resources based on the needs assessment.  
• Training should address the needs identified with the practitioners during the needs assessment.  
• Social welfare service providers should identify resources for that can meet education and training needs.  
• Social welfare service providers should create a database of accredited training and development service providers.  
• Social welfare service providers should complete a mid-term report on workplace skills training.  
• All social welfare practitioners should attend continuous professional development courses relevant to their job description as required by the policy on continuous professional development.  
• Social welfare practitioners should attend regular workplace skills training.  
• Social welfare practitioners should be encouraged to pursue postgraduate training opportunities where possible. |
### 2.2.10 Supervision

The table below indicates the norms and standards applicable to the supervision of social service practitioners.

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<thead>
<tr>
<th>Ref No.</th>
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<th>Standards</th>
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| O-SP-1  | Social welfare service providers should provide supervision for all social welfare service practitioners and students | • Social welfare service providers should appoint supervisors in their specific category of registration in terms of the human resource model, OSD and the supervision frameworks for social welfare services.  
• Supervision and consultation responsibilities should be allocated based on the requirements set for supervisors by the SACSSP.  
• Supervisors should be given an appropriate job description that spells out their responsibility, time allocation and accountability.  
• The supervisor-supervisee ratio may range between 4 and 8 depending on factors such as distance from each other and other job responsibilities. |
| O-SP-2  | Social welfare service providers should make supervision of social welfare service practitioners and students an integral and on-going part of the professional practice | • Newly qualified social workers should have at least three years of structured supervision on a fortnightly basis before they advance to a consultative level.  
• Assessment of newly appointed social workers’ performance should be done on a quarterly basis in line with personal development plans.  
• The duration and frequency of supervision should be determined by the supervisor in consultation with the supervisee and should take into account the  
  • experience of the supervisee;  
  • complexity of the work.  
• The minimum level of individual supervision should be one uninterrupted hour. |
| O-SP-3  | Supervision should be conducted in compliance with the code of ethics for social welfare practitioners | • Supervisors should ensure that they and the supervisees have a clear knowledge and understanding of the code of ethics as it relates to the supervisory relationship and process.  
• Supervisors should accept co-responsibility for the professional conduct of supervisees.  
• The organisation should ensure and enabling environment for supervision by providing all enabling resources required. |
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</table>
| O-SP-4  | Social welfare service providers should ensure the quality of supervision | - Assessment of supervisees’ performance should be done on a quarterly basis in line with the personal development plans.  
- Annual performance appraisal of social welfare service activities must be conducted by supervisors to enhance the quality of social welfare service delivery.  
- Feedback must be given by the supervisor after each performance appraisal.  
- Supervision should promote performance improvement by  
  - helping staff develop their professional competence;  
  - enabling staff to complete the KSF performance and development review;  
  - enabling staff to meet their post-qualifying and training requirements related to their on-going registration;  
  - helping staff initiate fresh ways of working in response to changing needs through the use of technology and other means;  
  - enabling staff to relate theory and research to practice;  
  - assessing training and development needs;  
  - developing skills and knowledge;  
  - helping staff reflect on their work and interaction with service users;  
  - providing feedback on performance;  
  - discussing knowledge and skills gained in training courses and identifying opportunities to integrate these into supervisees’ work;  
  - enabling staff to cope with the stresses the work entails;  
  - offering support with available resources to cope with stress and personal issues;  
  - creating a safe climate for staff to examine their practice;  
  - helping staff explore the effect of their work on them, both personally and professionally;  
  - helping staff explore emotional blocks to the work.  
- The overall functioning of staff should be monitored, especially with regard to the effects of stress, team dynamics and relationships. |
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| O-SP-5  | Supervisors should be qualified and experienced in the social welfare profession and occupation | • Supervisors should be qualified in the relevant profession and registered with the SACSSP with at least three years’ practice, preferably in a relevant field of practice (but not necessarily in the particular subfield) or with supervisory experience in another field.  
• Supervisors should attend a supervision course presented by an accredited service provider recognised by the SACSSP.  
• Supervisors must have a portfolio of evidence available upon appointment within the organisation which demonstrates relevant supervision or management courses completed, experience and competencies.  
• Supervisors must be listed on the database of supervisors of the SACSSP. |
| O-SP-6  | Supervisors should have appropriate training and experience | • Supervisors should attend a supervision course presented by an accredited service provider recognised by the SACSSP.  
• Supervisors should have undergone post-basic training in a field of practice or method of intervention relevant to their practice, for example a higher degree in social work, or specialist training in a field or method, or at least three years’ experience in the specific field or method.  
• The service provider agency should enable supervisors to benefit from development opportunities relating to supervision, which should be included in any existing budget for staff development, conference, leave, etc. |
| O-SP-7  | Supervision should be a collaboration between supervisors and supervisees based on the needs of the practice and the supervisees | • Supervision programmes should be tailored to the specific practice context.  
• A written supervision contract in the service agency should include long-term professional development objectives and should be negotiated and periodically reviewed by supervisors as well as supervisees.  
• **The supervision contract should indicate the following:**  
  o Respective roles and responsibilities.  
  o The frequency and nature (e.g. individual and/or group) of supervision.  
  o How agendas are to be drawn up.  
  o How the supervision sessions are to be recorded.  
  o How confidentiality is to be maintained – and what the limits are to this.  
  o How performance and development review requirements are to be met. |
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| O-SP-7  | Supervision should be a collaboration between supervisors and supervisees based on the needs of the practice and the supervisees | • How differences in the working relationship are to be managed  
• How the principles of diversity (within the supervisor/supervisee relationship and in service delivery) are to be handled.  
• How and when the contract is to be reviewed after every six months.  
• The supervision report should be signed by the supervisor and the supervisee.  
• The proposed supervision time is subject to the following conditions of the supervision interview.  
  o professional growth  
  o scheduled and prepared, and with aim  
  o one-to-one  
  o periodic and progressive  
  o regular and systematic |
|         |      |           |
| O-SP-8  | Supervision should be structured and planned, including all the functions of supervision | • The supervisor and the supervisee should prepare for the supervision by identifying issues to be covered.  
• An agenda should be drawn up in advance of any supervision meeting. The supervisor and the supervisee should contribute to the agenda.  
• Decisions made at the previous supervision meeting should be reviewed to ensure appropriate actions have been taken.  
• A reporting form of the supervisory practice or practice-related records, appropriate to the service setting(s) of the agency, should be developed.  
• All records relating to cases (whether individual or joint supervision or ‘impromptu’ discussions) should be recorded on the relevant file/pro forma form by the supervisee and signed by the supervisor within ten working days. The supervisee and supervisor must file these records in the case file.  
• Records relating to other matters should be recorded on the relevant pro forma form, signed by the supervisor and filed in the supervisee’s file by the supervisor within ten working days. |
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| O-SP-9  | Service providers should make provision for mechanisms and processes to deal with conflict in the supervisory relationship | • Procedures for dealing with a potential conflict situation that cannot be directly resolved by the supervisor and the supervisee should be developed and specified in the supervision agreement.  
• **Conflicts can be resolved by different means including:**  
  o peer mediation;  
  o the supervisor’s superior should attempt to mediate and determine the structural sources of the conflict in the supervisor-supervisee relationship;  
  o arbitration by the top management of the agency. |
| O-SP-10 | All supervision sessions should be recorded promptly and accurately and the records stored securely | • The quality of the work and supervision should be audited.  
• Records should reflect that issues of diversity have been dealt with both in the supervisory relationship and the service delivery.  
• All supervision records should be written and placed in casework and supervision files.  
• **Supervision should meet this requirement by ensuring that:**  
  o agency policies and procedures are understood and adhered to;  
  o the supervisee’s workload is managed and priorities are set;  
  o the quality of the supervisee’s performance (including anti-discriminatory practice) is measured;  
  o statutory responsibilities are met;  
  o work is allocated according to the experience and skill of the practitioner and the team’s/agency’s business plan;  
  o case recording, including daily records, is of the requisite standard;  
  o case files are audited as required;  
  o case plans are devised, implemented, reviewed and recorded on the case file;  
  o any advice/consultation on case work given outside formal supervision by the line manager or other manager is recorded by the supervisee and supervisor on the file. |
| O-SP-11 | The supervisor should ensure that the management function is carried out | • The supervisor should do the following:  
  o Clearly communicate organisational changes and initiatives to staff.  
  o Brief management about resource shortages.  
  o Convey staff needs to management.  
  o Seek policy clarification.  
  o Consult with staff and provide feedback to management on how organisational policies and practice are perceived.  
  o Arbitrate between team members when required. |
## 2.3 Process Norms and Standards

### 2.3.1 Social Welfare Service Practitioners

The table below indicates the norms and standards applicable to social service practitioners when rendering services.

<table>
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<tr>
<th>Ref No.</th>
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</table>
| P-SSP-1 | Social welfare service practitioners should register with the appropriate professional body | • Social welfare service practitioners should register with appropriate professional bodies in accordance with the policy and legislative framework.  
• Social workers, social auxiliary workers and child and youth care workers should register with the SACSSP.  
• Social welfare practitioners should comply with the regulations of their respective professional bodies in respect of the renewal of membership.  
  o Registered social welfare service practitioners should renew their membership on an annual basis with the SACSSP. |
| P-SSP-2 | Social welfare service practitioners should demonstrate their professional values and comply with the code of conduct in their practice | • Social welfare service practitioners should respect:  
  o beneficiaries regardless of their age, ethnicity, culture, level of understanding and need;  
  o the expertise and knowledge beneficiaries have about their own situation.  
• Social welfare service practitioners should involve beneficiaries in any decisions that affect them.  
• Social welfare service practitioners should ensure confidentiality by:  
  o conducting sessions in facilities that meet confidentiality standards;  
  o filing and storing data in a secure manner;  
  o obtaining permission from beneficiaries before any information is shared with others;  
  o informing beneficiaries when legally obliged to share information.  
• Social welfare service practitioners should:  
  o accept beneficiaries with all their uniqueness;  
  o challenge discriminatory practices affecting beneficiaries.  
• Social welfare service practitioners should adhere to their respective codes of conduct.  
• Social welfare service practitioners should dress appropriately in accordance with the culture and guidelines of the service provider. |
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| P-SSP-3 | Social welfare service practitioners should adhere to generally accepted standards for practice | • **Social welfare service practitioners should strive to establish and maintain the trust and confidence of beneficiaries from the first contact:**  
  o Social welfare service practitioners should work with beneficiaries to assess their needs and circumstances.  
  o Social welfare service practitioners should plan, carry out, review and evaluate social welfare services and interventions with beneficiaries and other professionals.  
  o Social welfare service practitioners should support individuals in declaring their needs, views and circumstances.  
  o Social welfare service practitioners should manage risks to beneficiaries, themselves and colleagues.  
  o Social welfare services practitioners should, as far as possible, involve beneficiaries in developing and implementing service plans in which their strengths and capacities are acknowledged and respected.  
  o Social service assessments and interventions should be appropriate to beneficiaries’ situations, in keeping with ethical and legislative requirements and directed towards appropriate outcomes agreed to with beneficiaries wherever possible.  
  o Social welfare service practitioners should be aware of the relationship between beneficiaries and their social environment and take appropriate action. |
| P-SSP-4 | Social welfare service practitioners should demonstrate competence in their practice based on appropriate qualifications, training and experience | • **Social welfare service practitioners should obtain the basic qualifications required by their respective professional bodies before practising.**  
• **Social welfare service practitioners should practise within their scope of work and acquired competencies.**  
• **Social welfare service practitioners should be supervised for a minimum of two years in line with the supervision policy.**  
• **Social welfare service practitioners who develop particular expertise should offer training and/or supervision to other practitioners requiring further development in that area.** |
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<th>Ref No.</th>
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<th>Standards</th>
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</table>
| P-SSP-5 | Social welfare service practitioners should manage and be accountable for their own social service practice within an organisation | • Social welfare service practitioners should:  
  o manage their own workload and time;  
  o comply with relevant standards of practice;  
  o work within multidisciplinary and multi-organisational teams, networks and systems;  
  o contribute to the management of resources and services;  
  o work openly and cooperatively with colleagues and treat them with respect;  
  o maintain clear and accurate records as required by established procedures;  
  o inform their employers or the appropriate authorities about any personal difficulties that might affect their ability to do their job competently and safely;  
  o seek assistance from their employers or the appropriate authorities if they are not able to or are inadequately prepared to carry out any aspect of their work or are not sure about how to proceed with their work;  
  o undergo relevant training to maintain and improve their knowledge and skills and contribute to the learning and development of others. |
| P-SSP-6 | Social welfare service practitioners should communicate openly and share information with beneficiaries about the nature and processes of social welfare services and record this information | • Social welfare service practitioners should explain to beneficiaries the nature of the services and the options available and describe any limitations in what is offered.  
• Social welfare service practitioners should involve beneficiaries in decisions on the most appropriate services.  
• Social welfare service practitioners should enable beneficiaries to access services from another provider if more appropriate.  
• Social welfare service practitioners should provide information to beneficiaries on their rights and responsibilities.  
• Social welfare service practitioners should explain:  
  o the process that will be followed;  
  o the role and the purpose of the process;  
  o their powers, including legal powers, in a way that can be understood by all concerned. |
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<th>Ref No.</th>
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<th>Standards</th>
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<tr>
<td>P-SSP-7</td>
<td>Social welfare service practitioners should engage in continuous</td>
<td>• Social welfare service practitioners should engage in continuous professional development activities and workplace training based on the needs of the providers and the gaps identified in the practitioners’ competence.</td>
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<td>professional development to ensure the development of their skills and</td>
<td>• Social welfare service practitioners should be able to relate their development skills and knowledge to the social, economic and political context in which they work.</td>
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<td>knowledge in their chosen field of practice and their understanding</td>
<td>• Social welfare service practitioners should be aware of the changes taking place in the community and the ways in which the changes might impact on the needs of beneficiaries.</td>
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<td>of the social issues impacting on society</td>
<td>• Social service practitioners should be aware of the social, economic and political factors affecting society.</td>
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<td>• Social welfare service practitioners should contribute to the understanding of the social issues facing beneficiaries.</td>
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<td>• Social welfare service practitioners should keep abreast of developments in the social environment and social research to ensure that their practice develops in tandem with theoretical knowledge and understanding.</td>
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<tr>
<td>P-SSP-8</td>
<td>Social welfare service practitioners should be able to work within</td>
<td>• Social welfare service practitioners should be able to describe the domain of their own practice.</td>
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<td>multidisciplinary and multiprofessional teams while maintaining their</td>
<td>• Social welfare service practitioners should contribute discipline-specific values, principles and practice to team activities.</td>
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<tr>
<td></td>
<td>professional values and principles</td>
<td>• Social welfare service practitioners should negotiate respectfully with colleagues from other disciplines.</td>
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<td>• Social welfare service practitioners should understand what services other disciplines and professions can offer.</td>
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<td></td>
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<td>• Social welfare service practitioners should work effectively with others to improve the services offered to beneficiaries.</td>
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<td></td>
<td><strong>Social welfare service practitioners should make sure all team members understand</strong>  *what happens to the information provided by beneficiaries;  *how it is kept;  *with whom it is shared with and why;  *how it might be used.*</td>
</tr>
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| P-SSP-9 | Social welfare service practitioners should report accurately and objectively on beneficiaries and the services provided in accordance with ethical principles and legislative provisions | • Social welfare service practitioners should report only on essential information that is relevant to the purpose of the report.  
• Social welfare service practitioners should not intentionally omit relevant and pertinent information.  
• Social welfare service practitioners should present information in an objective manner with assessments, recommendations and decisions supported by relevant information.  
• Social welfare service practitioners should clearly identify and state legislative implications and/or requirements with any associated beneficiary information and/or action to be taken.  
• Social welfare service practitioners should share reports with beneficiaries and invite feedback. Where this is not possible or feasible, or where part of a report is not available, the reason should be explained, including the extent to which the limitation applies. |
| P-SSP-10 | Social welfare service practitioners should keep and maintain records in accordance with ethical principles and the relevant legislation in social services practice | • Social welfare service practitioners should maintain a relevant record-keeping system.  
• Social welfare service practitioners should keep records in accordance with the provisions of the code of conduct.  
• Social welfare service practitioners should keep records in accordance with relevant legislation and agency policy.  
• Social welfare service practitioners should respond promptly and appropriately in accordance with legislation and agency policy to requests by beneficiaries for access to their records. Where this is not possible or feasible, or where part of a record is not available, the reason should be explained, including the extent to which the limitation applies. |
| P-SSP-11 | Social welfare service practitioners should continuously reflect on their practice in order to enhance the development of their knowledge, skills and understanding | • Social welfare service practitioners should reflect on services, processes and interventions to ensure that beneficiaries are provided with the most appropriate and effective options to meet the agreed outcomes.  
• Social welfare service practitioners should reflect on their own values in their relationships with beneficiaries to ensure that the relationships provide a conducive environment for interventions.  
• Social welfare service practitioners should write reports to record their reflections on social welfare service practice.  
• Social welfare services practitioners should reflect on their own practice so that it can develop and become more consistent with the values and principles of their discipline. |
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| P-SSP-12| Social welfare service practitioners should advise beneficiaries of their right to query the service provided and the avenues and procedures to follow | • Social welfare service practitioners should advise beneficiaries of their right and the procedures to query the extent and appropriateness of the social welfare service provided.  
• If any concerns are raised during social welfare service delivery, social welfare service practitioners should remind beneficiaries of this right.  
• Information regarding the rights of beneficiaries in relation to the service provided should be made available in writing.  
• Social welfare services practitioners should communicate the procedure for queries and complaints to beneficiaries. |
| P-SSP-13| Social welfare service practitioners should uphold public trust and confidence in social services | • **Social welfare service practitioners should not:**  
  o abuse, neglect or harm beneficiaries or colleagues;  
  o exploit beneficiaries or colleagues in any way;  
  o abuse the trust of beneficiaries or the access they have to personal information about them or their property, home or workplace;  
  o form inappropriate personal relationships with beneficiaries;  
  o discriminate unlawfully or unjustifiably against beneficiaries or colleagues;  
  o condone any unlawful or unjustifiable discrimination by beneficiaries or colleagues;  
  o place themselves or other people at unnecessary risk;  
  o behave in a way, in the workplace or outside it, that would call into question their competence to work in the social services field.  
• **Social welfare service practitioners should:**  
  o honour work commitments, agreements and arrangements and, when it is not possible to do so, explain the reason to beneficiaries;  
  o declare issues that might create conflicts of interest and make sure that they do not influence their judgment or practice;  
  o adhere to policies and procedures on accepting gifts and money from beneficiaries. |
### 2.3.2 Beneficiaries

The table below indicates the norms and standards applicable to beneficiaries of social welfare services.

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<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
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</table>
| P-B-1   | Social welfare service providers should promote, advocate and support the constitutional and specifically the human rights of beneficiaries | - Social welfare service providers should have a clear understanding of the Bill of Human Rights and its applicability to social welfare service delivery.  
- Social welfare service providers should respect beneficiaries who exercise their rights.  
- Social welfare service providers should accept and provide equitable services to beneficiaries who are diverse in their attitudes, actions, cultures, religions, sexual orientation, place of origin, age, education, disability, gender, marital status and HIV/AIDS status. |
| P-B-2   | Social welfare service providers should promote, advocate and support beneficiaries’ right to self-determination | - Beneficiaries’ self-determination and independence should be enhanced, as far as possible, through the use of specific techniques/instruments to establish an empowering environment based on beneficiaries’ needs.  
- Beneficiaries should be involved in the determination of their own needs and goals that need addressing.  
- Service provision should allow beneficiaries the choice of the service that will meet their needs or rights in their specific circumstances.  
- Beneficiaries should be involved in any decision during social welfare service delivery that affects their lives. |
| P-B-3   | Social welfare service providers should prioritise the right of beneficiaries to remain in their families and communities | - Social welfare services should be decentralised into communities.  
- Social welfare interventions should, where possible, be family based.  
- Families and communities should be empowered to support beneficiaries in meeting social challenges.  
- Where removal of beneficiaries from the family unit is appropriate, it should be a temporary measure, and they should have a right to be reintegrated into their families and communities. |
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<tr>
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| P-B-4 | Social welfare service providers should advocate, promote and support the right of beneficiaries to have access to information on social welfare services | • Beneficiaries should be informed about the social welfare services rendered and the manner and extent of the services so that they can make informed decisions.  
  **This should include at least the following:**  
  o Beneficiaries and communities should be given clear, accurate and accessible information about the types, availability, extent and limitations of the services provided.  
  o Information should be adapted to the specifics of each life stage.  
  o Information should include independent evaluation and quality assessment reports.  
  o Information that is relevant to beneficiaries should be published in the media.  
  o Transparent, accessible and user-friendly advice and complaint procedures for beneficiaries should be implemented.  
  • Social welfare service providers should continually inform beneficiaries about the process and progress of service delivery to maximise transparency. |
| P-B-5 | Social welfare service providers should support, promote and advocate beneficiaries’ right to participation | • Beneficiaries should be active participants in the development of social policies.  
  • Beneficiaries should be active participants in the evaluation of social welfare services.  
  • Beneficiaries and communities should be involved in the prioritisation, development and implementation of services. |
2.3.2.1 Beneficiaries - Children

The table below indicates the norms and standards applicable to people in the children life stage as beneficiaries of social welfare services.

<table>
<thead>
<tr>
<th>Ref No.</th>
<th>Norm</th>
<th>Standards</th>
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</table>
| P-B-C-1 | Children should have access to relevant, specialised resources and basic services to optimise their development | • Social welfare practitioners should involve parents and significant others when rendering services to children.  
• The maturity level of children should be taken into consideration in decision-making processes.  
• Social welfare practitioners should facilitate access to basic services such as housing, nutrition, schooling, water, sanitation and medical care.  
• Social welfare practitioners should involve multiple levels and methods of service delivery to ensure children’s access to basic services. |
| P-B-C-2 | Social welfare service points should be accessible to children in communities | • All service points should be equipped with at least the following human resources.  
• One full-time registered social worker.  
• One qualified social auxiliary worker.  
• One child and youth care worker.  
• Social welfare practitioners should perform a needs assessment and identify risk factors regarding children in a particular geographic area.  
• Social welfare practitioners should update the needs assessment annually.  
• The DSD should establish and implement a risk assessment tool.  
• The DSD should assess the implementation of the risk assessment tool annually.  
• Social welfare practitioners should keep an updated needs assessment or community profile.  
• Social welfare practitioners should constantly respond to identified risk factors and needs with appropriate programmes  
• Social welfare practitioners should give children a platform to participate in all activities and services affecting them.  
• The children’s level of maturity should be taken into account. |
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| P-B-C-2 (Cont.) |                                                                 | • The DSD should keep a register of all children provided with services.  
• One social welfare practitioner should serve a population of 3 000 (1:60) children at a particular service point.  
• All service points should have children-friendly amenities.  
• Social welfare practitioners should work hand in hand with other stakeholders.  |
| P-B-C-3 | The DSD, in collaboration with relevant stakeholders, should develop and implement policies and guidelines for all services to children | • The DSD and other stakeholders should develop policies and guidelines for all services to children.  
• Policies and guidelines should be based on research findings.  
• Social welfare services should be rendered in accordance with applicable policies and guidelines.  
• The DSD should monitor the implementation of policies and guidelines for services to children.  
• The DSD should develop a formal referral framework with time lines on service delivery to children depending on the type of intervention.  
• The DSD should review and update policies and guidelines for services rendered to children every three years.  
• All social welfare service providers and practitioners should have access to policies on and guidelines for services to children.  
• **All social welfare service offices should be in possession of the following documents:**  
  o Guidelines  
  o Protocols  
  o Policies  
  o Relevant legislative documents  
• The DSD should train social welfare practitioners on all policies and regulatory requirements for service delivery to children.  |
| P-B-C-4 | Social service practitioners should have the relevant qualifications, training and knowledge, and skills and competencies for child care and protection services | • The social welfare sector should develop a competency framework for child care and protection services.  
• Service providers and practitioners should undergo training and personal staff development relevant to child care and protection services.  
• The DSD should keep, update and maintain a database of all trained practitioners and service providers rendering child care and protection services.  
• The DSD should train, support and monitor service providers involved in the provision of services to children.  |
### 2.3.2.2 Beneficiaries – Youth

The table below indicates the norms and standards applicable to people in the youth life stage as beneficiaries of social welfare services.

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<th>Ref No.</th>
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| P-B-Y-1 | Social welfare service points should be accessible to the youth | • All service points should have at least the following human resources.  
• One registered social worker  
• One full-time youth care worker  
• One youth development worker  
• Service points should as far as possible be aligned with municipal or district demarcation areas. |
| P-B-Y-2 | The social welfare sector should, through research, identify projects or components of projects that can be delivered through the National Youth Service (NYS) | • National Youth Service projects should be identified through needs assessment or research.  
• Communities should be given the platform to participate in the assessment of research.  
• The DSD should develop and provide clear guidelines on the requirements for social welfare services to be provided through the National Youth Service as well as monitoring services.  
• Service providers should develop business plans in accordance with the approved guidelines and submitted as National Youth Service projects.  
• The DSD should develop and update a database with all the approved active National Youth Service projects.  
• The DSD should establish mechanisms to coordinate and collaborate in National Youth Service projects.  
• Service level agreements should be in place between the DSD and the National Youth Service. |
| P-B-Y-3 | The DSD should establish mechanisms to regulate youth care work and youth development work in the social welfare sector | • The DSD, in collaboration with other stakeholders, should develop a framework for youth care work and youth development work in the social welfare sector.  
• Appropriately trained practitioners should be appointed for youth care work and youth development work.  
• The human resource model should clearly identify the competencies of and requirements for these practitioners. |
### 2.3.2.3 Beneficiaries - Adults

The table below indicates the norms and standards applicable to people in the adult life stage as beneficiaries of social welfare services.

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<tr>
<th>Ref No.</th>
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</table>
| P-B-A-1 | Social welfare service points should be accessible to adults in need of services | • All social welfare service points should have at least one full-time registered social service practitioner.  
• Social welfare service delivery should be community based.  
• Programmes should be defined through needs-based assessment.  
• Social welfare services should be accessible after hours for emergency cases. |
| P-B-A-2 | The social welfare sector should, through research, identify projects or components of projects that can be delivered to vulnerable adults | • The DSD should, in collaboration/consultation with other stakeholders, develop and provide policies, clear guidelines and frameworks on/for the requirements for social welfare services to be provided to adults.  
• The social welfare sector should, through research and needs assessments, identify programmes or components of projects that can be delivered to vulnerable adults.  
• **Social welfare services should promote the empowerment of adults to be self-reliant as regards the following:**  
  o financial management  
  o parenting skills  
  o stress management  
  o conflict management,  
  o problem-solving skills  
  o life management |
| P-B-A-3 | The social welfare sector should meet the challenges of vulnerable adults in the family context | • The social welfare sector should develop and implement programmes for vulnerable adults in the family context.  
• Programmes should be developed and implemented to minimise risk factors and increase resilience in the family. |
2.3.2.4 Beneficiaries – Older People

The table below indicates the norms and standards applicable to people in the older persons life stage as beneficiaries of social welfare services.

<table>
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<th>Ref No.</th>
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| P-B-OP-1 | The social welfare services sector and all relevant stakeholders should promote active ageing among older people | • The social welfare services sector should facilitate, develop and implement a framework that will ensure:  
  o the identification and linkage of older people with programmes and project activities that promote active ageing;  
  o a conducive environment for the establishment of active ageing in all communities;  
  o the registration of active ageing programmes in accordance with policies and legislation;  
  o the alignment of active ageing programmes with the mental and physical abilities of the aged.  
• Collaborative partnerships with the Department of Sport and Recreation and other departments should be established to provide support programmes.  
• The DSD should establish an equitable funding model for all providers of active ageing programmes.  
• The social welfare sector should establish suitable recreational facilities for active ageing in all communities.  
• The social welfare sector should develop and implement programmes and interventions for active ageing. |
| P-B-OP-2 | Social welfare service practitioners should understand the dynamics of ageing and disability when rendering social welfare services to older people | • The social welfare sector, in collaboration with other specialised service providers such as the Department of Health, should develop guidelines on the stages of ageing to inform service rendering to older people.  
• The DSD and other stakeholders should monitor through performance management whether the dynamics of ageing are understood and applied.  
• Care givers should be trained to be sensitive to the dynamics of older people.  
• Older people should be encouraged to look after other older people.  
• Quarterly progress reports should be used as a monitoring tool. |
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| P-B-OP-3 | The DSD should develop policies and legislation on the provision of frail care services to the aged | • Facilities to provide frail care facilities should be available in all districts.  
• Registration of frail care facilities should be in line with the relevant Act, policies and guiding documents.  
• The DSD should establish and maintain a database on frail older people statistics.  
• Minimum standards for frail care should be made known to all service providers.  
• Deliverables should be agreed upon in consultation with relevant facilities.  
• The DSD should provide subsidies for such facilities.  
• Regular monitoring, evaluation and capacity building should be done annually. |
| P-B-OP-4 | All residential facilities should promote the independent and assisted living of older people | • All old age residential facilities should establish facilities for independent and assisted living.  
• The independent and assisted living of older people should be carried out in accordance with applicable guidelines.  
• Older people should be supported to live independently until frail care is required.  
• The social welfare sector should establish facilities for independent living.  
• The establishment of these facilities should be informed by a needs assessment.  
• Older people should be involved in programmes that promote independent living such as:  
  • Gardening projects  
  • Sewing or knitting projects  
• Older people should be encouraged to live independently in the community, and, only as a last resort, should they be moved to a frail care facility when the need arises.  
• All residential facilities should provide respite care for older people to give relief to the family. |
### 2.3.3 Services

The table below indicates the norms and standards applicable to the direct provision of social welfare services.

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| P-B-OP-5 | The DSD, together with the Department of Health, should provide rehabilitation and re-integration services to older people | • Rehabilitation and re-integration programmes for older people should be developed and implemented.  
• The DSD and the Department of Health should develop, implement and monitor rehabilitation and re-integration programmes for older people.  
• The DSD should ensure the accreditation of rehabilitation and re-integration programmes for older people.  
• The DSD should maintain partnerships with specialised service providers to implement, develop and monitor rehabilitation and re-integration programmes for older people.  
• Social welfare services should include intergenerational programmes to enhance the social integration of older people. |
| P-B-OP-6 | Older people should be protected against all forms of abuse         | • All stakeholders should develop, implement and monitor programmes aimed at preventing the abuse of older people.  
• All stakeholders should ensure that dedicated social workers are available to render services to older people. |

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| P-S-1   | The social welfare sector should render services according to the Social Welfare Policy and Legislative Framework | • The Social Welfare Policy and Legislative Framework, attached as Appendix A, should guide the delivery of all services.  
• The Social Welfare Policy and Legislative Framework as discussed in Chapter 1 of the norms and standards document should guide the delivery of services in terms of the different life stages and focus areas. |
| P-S-2   | All service providers should render a minimum basket of services in accordance with their registration | • Social welfare services rendered by social service providers should include one or more of the following services:  
  o Prevention and promotion services  
  o Social assistance and relief services  
  o Protection and statutory services  
  o Therapeutic and treatment services  
  o Continuing care services |
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</table>
| P-S-2 (Cont.) | All service providers should render a minimum basket of services in accordance with their registration | • Support services  
• Re-integration and aftercare services |
| P-S-3 | All providers of social welfare services should provide prevention and promotion services irrespective of their life stage or focus area of interest | • Prevention and promotion services should be specific to the life stage needs of beneficiaries.  
• Prevention and promotion services should address the prevalent needs or vulnerability of beneficiaries in terms of strategic focus areas. |
| P-S-4 | Prevention and promotion services should include preventive interventions related to strategic focus areas | • Prevention and promotion services should include the following:  
• Universal preventive interventions that target the general public or a whole population group that has not been identified on the basis of individual risk, including awareness raising and information sharing on the identified focus area.  
• Selective preventive interventions that target individuals or a subgroup of the population whose risk or vulnerability is significantly higher than average.  
• Indicated or focused preventive interventions that target high-risk/vulnerable individuals, including social behaviour change interventions related to the identified focus area. |
| P-S-5 | Prevention and promotion services should include promotive interventions related to the strategic focus areas | • Promotive interventions should:  
• include multiple strategies such as use of the media;  
• address societal factors that contribute to vulnerability. |
| P-S-6 | Social assistance and relief services should be equitable, accessible and integrated with social development interventions | • Social welfare service providers should facilitate access to social assistance and relief services (e.g. SRD, emergency packs for removal of children, food parcels for family financing).  
• The availability of and criteria for social assistance and relief services should be communicated clearly in all communities.  
• Social assistance and relief services should be available within the stipulated time frames:  
• Emergency food parcels – immediately according to the Children’s Act  
• Social relief should be available within hours after application for such relief.  
• Social assistance applications should be finalised within eight hours – more realistically, 45-56 hours. |
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| P-S-7   | Protection and statutory services should be equally accessible to all vulnerable people and should safeguard the well-being of individuals, families and communities | • Clear referrals should be made by providers of social assistance and relief services to sustainable developmental programmes.  
• Community profiling and assessments should be conducted to identify the most vulnerable groups in the community.  
• **Protection services should be publicised clearly in all communities including:**  
  o ways to gain access to such services;  
  o different resources available in the community.  
• Protection services should cover vulnerability, risk, inequality and chronic poverty affecting people with disabilities, older people, women, children and orphans in particular.  
• Protection services should aim at placing individuals and families in a safe and nurturing environment.  
• Protection services should include removing individuals or families from their usual place of residence to an alternative, safer place of residence. |
| P-S-8   | Therapeutic/rehabilitative/restorative services should aim at restoring the social functioning of beneficiaries whose social functioning is impaired | • **Therapeutic services should be rendered as follows:**  
  o On an in-patient or out-patient basis  
  o As a community-based service  
  o As a family-based service  
  o As a multidisciplinary service  
  o As an integrated service |
| P-S-9   | Social support services should enhance, strengthen and stabilise individual, family and community life by acting as a buffering agent against stress and risk thus protecting people from their negative impact | • Social support services should assist individuals and families to identify and meet their own social needs.  
• **Social support services could consist of the following:**  
  o Emotional support.  
  o Appraisal support that involves the communication of information in the form of affirmation, feedback and social comparison.  
  o Informational support that includes advice, suggestions or directives that assist people to respond to personal or situational demands. |
| P-S-10  | Continuing care services should be equally accessible to all vulnerable persons who are not able to look fully after themselves | • Continuing care services should maintain or improve the physical, social and psychological well-being of individuals.  
• Continuing care services should be provided over an extended period of time to meet physical or mental health needs that have arisen as a result of disability, an accident or illness. |
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</table>
| P-S-10  | Continuing care services should be equally accessible to all vulnerable persons who are not able to look fully after themselves | • Continuing care services should be provided in a variety of settings including hospitals, nursing homes, hospices, family homes and communities.  
• **Continuing care services should be publicised clearly in all communities including:**  
  o information on ways to gain access to such services;  
  o information on different resources in the community. |
|         | (Cont.)                                                              |                                                                                                                                         |
| P-S-11  | Re-integration and aftercare services should aim to re-integrate individuals and families into society as independent functioning systems | • Re-integration and aftercare services should contribute to the functioning of the family.  
• Re-integration and aftercare services should enhance self-reliance and optimal social functioning in the family and community.  
• Re-integration and aftercare services should include an integration process, especially where an intervention involved the removal of people from their usual place of residence. |
| P-S-12  | National and provincial departments of social development should ensure an equitable spread of social welfare services in respect of all life stages and strategic focus areas | • The establishment of services at facilities should be based on national and provincial profiles and should be in line with national and provincial strategies.  
• Profiles should be reviewed every three years.  
• Services should prioritise the most vulnerable communities and persons. |
| P-S-13  | Social welfare services should be rendered in a holistic, coordinated and integrated manner | • The Provincial Department of Social Development should ensure that all services and the total continuum of services are available in each district.  
• The Provincial Department of Social Development should limit duplication of services in districts when approving the establishment of new social welfare facilities and offices/centres.  
• The Provincial Department of Social Development should identify gaps in services and ensure the establishment of new social welfare facilities and offices/centres to address specific gaps in social welfare service delivery.  
• Social welfare service providers should offer continuous and sustainable services.  
• Social welfare service providers should facilitate access to multidisciplinary services that fully meet the needs and demands of beneficiaries. |
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<tbody>
<tr>
<td>P-S-13 (Cont.)</td>
<td>Social welfare services should be rendered in a holistic, coordinated and integrated manner</td>
<td>• Social welfare service providers should ensure the continuum of service delivery and stipulate the involvement of other service providers and relevant stakeholders. • Social welfare service providers should identify and administer the contributions of other partners involved in providing services. • Social welfare service providers should have sufficient qualified staff to ensure that all requirements of the service provision process are met.</td>
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<td>P-S-14</td>
<td>Social welfare service providers should deliver services within a human rights approach</td>
<td>• Social welfare service providers should deliver services from a rights-based approach. • Social welfare service providers should observe and apply their code of conduct in all services rendered. • Social welfare service providers should develop and implement a code of conduct for their service delivery within the framework of relevant legislation.</td>
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<td>P-S-15</td>
<td>Social welfare service providers should provide comprehensive social welfare service delivery</td>
<td>• Social welfare service providers should deliver services on a micro-level, mezzo-level and macro-level. • Social welfare service providers should ensure that their understanding of the developmental approach is shared with other team members. • Social welfare service providers should adopt a multi-therapeutic, multidisciplinary approach on a micro-, mezzo- and macro-level when rendering social welfare services. • Multidisciplinary and multi-professional teams should assess and plan for service delivery holistically and comprehensively.</td>
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<td>P-S-16</td>
<td>Social welfare services should be responsive to the needs of beneficiaries</td>
<td>• Community and beneficiary profiles should inform the need for specific social welfare service delivery. • Research and needs assessments should be performed and documented by social welfare service providers to ensure that service delivery is focused on the needs of beneficiaries. • Community profiles and need assessments should be reviewed and updated annually by all stakeholders in order to identify changing needs and priorities. • All relevant stakeholders should be engaged in collaborative research and community prioritising.</td>
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| P-S-17 | Social welfare service providers should ensure participation by stakeholders and beneficiaries in social service delivery | • Social welfare service providers should have procedures in place regarding the involvement of beneficiaries in designing policies and strategies.  
• Beneficiaries should be actively involved in all service delivery processes.  
• The participation of beneficiaries in an organisation should be evaluated annually.  
• Service providers should engage beneficiaries in self-assessment and beneficiary feedback. |
| P-S-18 | Social welfare services should be people centred                     | • Social welfare service providers should focus on beneficiaries and their needs and rights from their frame of reference.  
• Social welfare services should be rendered at a pace and level beneficiaries can understand.  
• Social welfare service providers should consider the context, circumstances and the environment of beneficiaries in order to provide services that are people centred. |
| P-S-19 | The social welfare sector should adopt a sustainable livelihood approach when rendering services | • Social welfare services should integrate social and economic development programmes to ensure sustainable livelihood.  
• **Specific interventions should be developed and implemented to address sustainable livelihood including the following:**  
  - Education, training and development  
  - Empowerment  
  - Skills development programmes  
  - Income generation and job creation |
| P-S-20 | Social welfare services should be rendered equitably to beneficiaries in all strategic focus areas | • **The strategic focus areas that should be addressed in terms of the life stages:**  
  - Poverty alleviation  
  - Social integration  
  - Family preservation  
  - Care and protection of vulnerable groups  
  - Prevention, care and treatment related to substance abuse  
  - Prevention, care and support to promote mental and social wellness  
  - Social crime prevention  
  - Victim empowerment  
  - Prevention of HIV/AIDS and care and support for victims |
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| P-S-21  | Social welfare services should be rendered on all levels of service delivery. | • **Levels of service delivery refer to:**  
  o the preventive level;  
  o the early intervention (non-statutory) level;  
  o the statutory level including residential and/alternative care;  
  o the rehabilitation, reunification and aftercare level. |
| P-S-22  | Social welfare services should be rendered on all levels of service delivery incorporating the different systems of intervention. | • **Systems of intervention refer to:**  
  o the micro-level — individuals, couples and families/households;  
  o the mezzo-level — groups;  
  o the macro-level — communities and societies. |
| P-S-23  | Social welfare services should be rendered to all beneficiaries throughout their life stages. | • **The primary life stages refer to:**  
  o children;  
  o the youth;  
  o adults;  
  o older people. |
| P-S-24  | Social welfare service providers should render community-based services | • Social welfare services should be decentralised to local communities.  
  • Community profiles should be considered in determining the need for services.  
  • Social welfare services should be developed in consultation and with the participation of communities. |
| P-S-25  | Social welfare service practitioners should render services within the context of the family | • Social welfare service practitioners should acknowledge the importance of the family as the core system in society.  
  • Services and interventions should be planned within the context of the family.  
  • Services aimed at strengthening the family as an intervention strategy in all focus areas should be central to social welfare service delivery. |
| P-S-26  | Social welfare service providers should mainstream and integrate services to people with disabilities when required | • Social welfare service providers should, in collaboration with relevant stakeholders, develop, implement and monitor mainstreamed services to people with disabilities.  
  • These services should consider specifically the following:  
  o Self-respect and self-sufficiency (services to people with disabilities should be carried out with their full consent and inclusion. Also, projects and activities should facilitate, as far as is possible and feasible, independent living). |
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| P-S-26 (Cont.) | Social welfare service providers should mainstream and integrate services to people with disabilities when required | • Access to appropriate services (services and interventions for people with disabilities should be specific and responsive to all types and categories of disability).  
• Social integration (the focus on the abilities of people with disabilities and on the ‘environmental’ barriers they experience should provide a more comprehensive and appropriate response to facilitating full social inclusion and integration into society).  
• Inclusion (services should be rendered in a way that promotes the mainstreaming of disability so that it is addressed in the context of normal community services).  
• Equal access to opportunities for persons with disabilities should be maintained and achieved in service delivery on the ground.  
• Social welfare service practitioners should be trained and sensitised to the needs and challenges of people with different disabilities. |
| P-S-27 | Social welfare service delivery should focus on the different levels and methods of intervention | • Social welfare service providers and practitioners should identify and apply different forms of intervention and methods of service delivery.  
• Social welfare services should apply micro-level, mezzo-level, and macro-levels or systems of intervention to address different focus areas.  
• Intervention plans should clearly identify the system and method of intervention.  
• All services should be guided by an intervention plan. |
| P-S-28 | All social welfare services should be rendered according to generic processes | • The social welfare sector should ensure that the following generic processes are followed by social welfare service providers and practitioners.  
• Engagement/Intake  
• Assessment  
• Plan  
• Intervention  
• Evaluation  
• Termination (completion)  
• Approved control documents should be used for identified intervention processes.  
• The social welfare sector should train service practitioners on the generic processes to be followed. |
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<td>P-S-29</td>
<td>All client engagement/intakes should be conducted and recorded according to the particular activities</td>
<td><strong>The following activities should form part of the intake process.</strong>&lt;br&gt; o Receiving the client.&lt;br&gt; o Doing basic screening re place/type of service.&lt;br&gt; o Administering referrals, if required.&lt;br&gt; o Scheduling intake interviews.&lt;br&gt; o Conducting intake interviews.&lt;br&gt; o Completing intake forms and process notes.&lt;br&gt; o Capturing and filing intake forms and process notes.</td>
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<td><strong>The following control documents should be used in the intake process.</strong>&lt;br&gt; o All clients referred by other providers should be accompanied by a referral note (Form SWS03).&lt;br&gt; o Basic client information (personal details) should be captured on the Reception Register form (SWS01).&lt;br&gt; o Intake information should be captured on the Intake form (SWS02).&lt;br&gt; o The intake session should be captured in a process note (Form SWS04).&lt;br&gt; o A copy of the client’s identity document should be obtained and filed in the client’s file.&lt;br&gt; o Clients referred to external providers after screening or intake should be registered on the referral list and provided with a referral note (Form SWS03).&lt;br&gt; <strong>The following time frames should guide the planning and execution of intakes.</strong>&lt;br&gt; o The average time allowed for the intake process should be 90-120 minutes.&lt;br&gt; o Referral after intake should be within three working days except in emergency cases when it should be within eight hours.&lt;br&gt; o An intake interview should be scheduled within three working days after screening or receipt of a referral.&lt;br&gt; o All administration for an intake should be completed within two working days after completion of the intake process.</td>
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| P-S-30 | The social welfare sector should use recognised assessment tools in service delivery | • The social welfare service provider should, in consultation with other service providers, develop guidelines on the use of specialised assessment tools.  
• Social welfare service practitioners should be trained and equipped to use specialised assessment tools.  
• **Relevant information should be gathered on the client’s situation such as:**  
  o physical factors including health and well-being, addiction;  
  o social factors including family, significant relationships, social contacts and supports, experience of discrimination and oppression, and community involvement;  
  o psychological factors including developmental and lifespan factors, significant life events, grief and loss, exposure to violence, abuse or neglect;  
  o environmental factors including education, employment, finances, accommodation and other services used by the client;  
  o legal, education, health, employment and social security systems that impact on or with which the client is involved;  
  o personal and other resources that might influence the client’s situation.  
• Ethical considerations should be identified and managed appropriately.  
• The nature and level of risk for the client should be assessed and appropriate action taken.  
• The assessment process should comply with ethical and legislative requirements and should be directed towards appropriate outcomes reached in agreement with the client. |
| P-S-31 | An assessment, according to the standardised activities, should be conducted and recorded before any intervention | **Assessment should include the following minimum activities.**  
  o Receiving referral from intake.  
  o Scheduling appointment for assessment.  
  o Conducting assessment including standard tests/drawings/interviews.  
  o Compiling an assessment report that should identify a need for service;  
  o recommend a plan of action for specific intervention; |
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<td>P-S-31</td>
<td>An assessment, according to the standardised activities, should be conducted and recorded before any intervention</td>
<td>• capture and file a process note;</td>
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<td>• provide feedback to the client.</td>
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<td>• <strong>The following control documents should be used in this process.</strong></td>
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<td>• All clients referred for assessment should have a referral note (Form SWS03).</td>
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<td>• Assessment report (Form SWS05).</td>
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<td>• The assessment session should be recorded in a process note (Form SWS04).</td>
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<td>• Clients referred to external service providers after assessment should be registered on the referral list and provided with a referral note (Form SWS03).</td>
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<td>• <strong>The following time frames should guide the planning and execution of assessments.</strong></td>
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<td>• The time allowed for the assessment process should be 120-150 minutes.</td>
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<td>• The initial assessment should be completed within seven days from intake.</td>
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<td>• A follow-up session should be scheduled within five working days after assessment.</td>
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<td>• All administration for an assessment should be completed within two working days after completion of the process.</td>
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<td>P-S-32</td>
<td>All social welfare service interventions should be based on an assessment including the recommended plan. The interventions should include clear activities/action steps and should be recorded</td>
<td>• <strong>Interventions should include the following minimum activities.</strong></td>
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<td>• Identifying the type of intervention mode or method required.</td>
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<td>• Compiling a plan and preparing for intervention sessions in consultation with the client.</td>
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<td>• The plan should include</td>
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<td>• plans for an intervention containing an approach, goals, techniques, skills, values;</td>
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<td>• plans for mezzo-level and macro-level interventions containing a business plan and a budget;</td>
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<td>• guidelines for conducting/executing the intervention sessions;</td>
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<td>• guidelines for completing process notes and progress reports (if applicable);</td>
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<td>• guidelines for filing and capturing process notes and progress reports.</td>
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<td>P-S-32 (Cont.)</td>
<td>All social welfare service interventions should be based on an assessment including the recommended plan. The interventions should include clear activities/action steps and should be recorded.</td>
<td>o The following control documents should be used in this process.&lt;br&gt;o Assessment report (Form SWS05)&lt;br&gt;o Business plan and budget&lt;br&gt;o Process note (Form SWS04)&lt;br&gt;o Progress report&lt;br&gt;• The following time frames should guide the planning and execution of interventions.&lt;br&gt;o Individual, couple or family counselling: 90-120 minutes&lt;br&gt;o Group counselling: 120-150 minutes&lt;br&gt;o Training: depends on plan&lt;br&gt;o Presentations: depends on plan&lt;br&gt;o Event/Campaign: depends on plan&lt;br&gt;o All administration for an intervention should be completed within two days after completion of the process.</td>
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<td>P-S-33</td>
<td>All social service interventions should be based on an agreement between the social welfare service practitioner and the beneficiary.</td>
<td>• Social welfare service providers should ensure that the user understands the content and purpose of the agreement.&lt;br&gt;• The proposed service should be based on the availability of resources and the potential and agreed personal goals of the user.&lt;br&gt;• The fulfilment of the user’s personal goals should be reassessed during the course of the service. The user should be able to change to change his/her personal goals.&lt;br&gt;• The way of recording the service implementation should be determined in accordance with the internal rules of the service provider.</td>
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<td>P-S-34</td>
<td>All social welfare interventions should be evaluated and recorded according to standard procedures.</td>
<td>• Evaluation should include the following minimum activities.&lt;br&gt;o Reviewing the objectives of the initial plan by re-reading the process notes and consulting with the client.&lt;br&gt;o Reviewing the progress and achievement of objectives through retrospection with the client.&lt;br&gt;o Jointly deciding the best way forward:&lt;br&gt; Termination&lt;br&gt; Continued intervention&lt;br&gt; Alternative intervention&lt;br&gt; Referral&lt;br&gt;o Completing the evaluation report and process note of the evaluation session.&lt;br&gt;o Capturing and filing the evaluation report and process note.</td>
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| P-S-34  | All social welfare interventions should be evaluated and recorded according to standard procedures | - The following control documents should be used in this process.  
- Evaluation report (Form SW506)  
- Process note (Form SW504)  
- **The following time frames should guide the planning and execution of evaluations.**  
  - The average time allowed for the evaluation process should be 60-90 minutes.  
  - Referral, if required after the evaluation, should be within two days.  
  - All administration for the evaluation should be completed within two days after completion of the process. |
| P-S-35  | All referrals should be done according to standard procedures and recorded | - **Referral should include the following minimum activities.**  
  - Identifying specific needs for services.  
  - Identifying specific resources required and service providers.  
  - Agreeing jointly with the client on referral.  
  - Compiling referral note.  
  - Making further telephone calls/faxes re referral note if necessary.  
  - Compiling process note.  
  - Capturing and filing process note and referral note.  
- **The following control documents should be used in this process.**  
  - The referral session should be captured in a process note (Form SW504).  
  - Clients referred to external providers should be registered on the referral list and provided with a referral note (Form SW503).  
- **The following time frames should guide the planning and execution of referrals.**  
  - The average time allowed for the referral process should be 60-75 minutes.  
  - All administration for a referral should be completed within two days after completion of the process. |
### Generic Norms and Standards for Social Welfare Services

#### 2.4 Outcome − End Results Norms and Standards

The table below indicates the outcome norms and standards applicable to social welfare services.

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| ER-1    | Social welfare services should improve the quality of life of all citizens | • Social welfare services should enhance the social functioning of beneficiaries.  
• Social welfare services should increase the resilience of beneficiaries.  
• Social welfare service should decrease the vulnerability of beneficiaries. |
| ER-2    | Social welfare service should decrease the vulnerability and increase the resilience of beneficiaries | • Social welfare services should focus on the following issues.  
  o Poverty alleviation  
  o Family preservation  
  o Social integration  
  o Decreasing social crime  
  o Mitigating the impact of crime |
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| ER-2 (Cont.) | Social welfare service should decrease the vulnerability and increase the resilience of beneficiaries | o Victim empowerment  
o Decreasing substance abuse  
o Mitigating the impact of substance abuse  
o Increasing social and mental wellness  
o Decreasing HIV infection  
o Mitigating the impact of HIV and AIDS |
| ER-3 | The social welfare sector should promote the social integration of beneficiaries | • Social welfare service providers should do the following:  
o Promote the active and continued participation of all individuals in social, economic, cultural, spiritual and civic affairs.  
o Enhance intergenerational relationships in families and communities.  
o Promote social connections in families and communities.  
o Reduce inequality, discrimination and the exclusion of marginalised or vulnerable groups.  
• The social welfare sector should emphasise the mainstreaming of all marginalised groups in all aspects of social welfare service delivery including:  
o legislation and policy development, implementation and research;  
o planning, implementation and monitoring of programmes and projects;  
o resource allocation;  
o creating opportunities for participation, consultation, advocacy, consultation and dialogue;  
o networking with local government and other stakeholders. |
| ER-4 | Social welfare services should enhance the safety and security of all people | • The social welfare sector should support and promote the constitutional rights of all individuals with regard to care and protection through:  
o improved access to all protection services;  
o reduced exposure to abuse, neglect, sexual exploitation and crime;  
o improved data and information systems for the reporting, monitoring and evaluation of progress in all care and protection as well as prevention of crime services;  
o improved physical, emotional, psychological, social and/or material assistance to beneficiaries; |
### Generic Norms and Standards for Social Welfare Services

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| ER-4 (Cont.) | Social welfare services should enhance the safety and security of all people | • increased ability to address conflict in the family and community;  
• mitigation of the impact of crime;  
• prevention of all forms of social crime including family violence.  
• **Social welfare services should increase community participation in:**  
  • the protection of individuals and families;  
  • supporting victims of violence and crime;  
  • restorative justice mechanisms;  
  • improving intergenerational relations. |
| ER-5 | The social welfare services sector should promote family preservation | • The social welfare sector should recognise and emphasise the importance of families.  
• **The social welfare sector should promote family preservation through:**  
  • enhancement of family functioning and relationships;  
  • improved family re-integration and reunification where appropriate;  
  • improved continuity and permanence with regard to placements;  
  • supporting the development of positive values in families;  
  • helping with adjustments to changing roles in families and society;  
  • addressing changed gender attitudes and perceptions in the community. |
| ER-6 | Social assistance and relief services should be aimed at poverty alleviation | • The social welfare sector should:  
  • reduce poverty at household levels;  
  • link social grant beneficiaries to sustainable livelihood initiatives;  
  • improve access to basic services — health, education, housing, water, sanitation, electricity and welfare services. |
| ER-7 | Social welfare services should promote the mental and social wellness of beneficiaries | • Social welfare service providers should emphasise a developmental, preventive and restorative approach to the delivery of social welfare services with the emphasis on wellness.  
• Social welfare services should develop the interpersonal and social skills of people. |