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2.1 Special needs

STANDARD 7: Ensure an initial procedure is in place to identify and assess special needs for unaccompanied children.

Indicator 7.1: A standardised mechanism/procedure to systematically identify and assess special needs for unaccompanied children is in place.

- ***Additional remarks:*** *As stipulated in Article 22(2) RCD, this mechanism/procedure does not need to take the form of an administrative procedure but should refer to child protection and child safeguarding standards. The EASO IPSN Tool could be integrated in such a mechanism/procedure.*

Indicator 7.2: The mechanism clearly prescribes who is responsible for the identification and assessment of special needs.

Indicator 7.3: The mechanism clearly prescribes how the identification and the assessment of the needs are recorded and communicated to the unaccompanied children and to relevant actors.

- ***Additional remarks***: *Recording and effectively communicating the information regarding special needs to unaccompanied children and to relevant actors is crucial in order to ensure that the necessary guarantees have been put in place. National confidentiality and data protection regulations would apply during the operation of the mechanism. In some cases, formal procedures would apply, such as in the case of national referral mechanisms for victims of human trafficking.*

Good practice on the initial identification of special needs
It is considered good practice to:

- set up a mechanism for the initial identification of special needs as part of national operating procedures;
- use a template to identify special needs and potential risks to the child's well-being at an early stage, addressing:
  - data on the date and place of birth, the country of origin, the native language as well as marital status and children;
  - information on parents, siblings and/or information on other relatives within the current MS of reception, another EU+ state or a third country;
  - state of health of the child (general state of health, chronic diseases, disabilities, surgeries, medication, mental health);
  - living conditions in the country of origin;
  - education in the country of origin;
  - reasons for leaving the country of origin (including parental consent).

STANDARD 8: Ensure that the mechanism/procedure for identification and assessment of special needs is effectively applied as soon as possible after arrival.

Indicator 8.1: Sufficient resources are allocated to systematically identify and assess the special needs of each unaccompanied child.

Indicator 8.2: The initial identification and assessment of obvious vulnerability in order to address special needs is conducted upon arrival during the reception intake on the first day, or at the latest within 24 hours.

Indicator 8.3: Special needs that become apparent at a later stage are adequately identified and assessed, addressed and documented.

Indicator 8.4: Where relevant, specialised actors are involved in the assessment of special needs.

- ***Additional remarks:*** *The representative and specialised actors such as social workers, psychologists or medical professionals may be involved in the assessment of special needs depending on the nature of these needs. Their expertise should be effectively accessible to the reception authorities where necessary.Aqualified interpreter should be provided where appropriate.*

Indicator 8.5: Communication channels and cooperation between the reception authority and the determining authority are established and used within the limits of confidentiality.

- ***Additional remarks:*** *Identification and assessment of special needs are more effective when information iscommunicated between the authorities, without prejudice to national confidentiality and data protection regulations.*

Indicator 8.6: The identification and assessment of special needs takes place without prejudice to the examination of the unaccompanied children's application for international protection.

- ***Additional remarks:*** *It is important to clearly separate the issues of identification and assessment of special reception (and procedural) needs and the examination of the unaccompanied children's application for international protection. While in some cases the unaccompanied children's situation of vulnerability would also have an impact on the outcome of the application for international protection, the purpose of the identification and assessment of needs as per this guidance is solely to guarantee effective access to the rights and benefits under the RCD during the asylum procedure.*

STANDARD 9: Ensure that identified special needs are addressed in a timely manner.

Indicator 9.1: Adequate action is taken to respond to the identified and assessed special needs. The urgency of the response will depend on the identified need.

- ***Additional remarks:*** *Sufficient resources should be allocated to the response to special needs. In addition, standard operating procedures and/or referral mechanisms should be used if appropriate such as in cases of trafficked children, married children, children with related adults, children with disabilities.*

Indicator 9.2: In cases where special needs have been identified there is a mechanism in place to ensure their regular monitoring.

- ***Additional remarks:*** *EU+ States should envisage regular follow up monitoring of identified special needs.*

Good practice on the identification, assessments and response to special needs
It is considered good practice to:

✓ Set up a mechanism for the identification and assessment of special needs as part of national operating procedures. An identification tool could be integrated into these procedures.
✓ Organise multidisciplinary meetings on a regular basis with all relevant actors, including NGOs; gathering information in a pro-active way, using available resources prior to reception.
✓ Subject the identification of special needs to the day-to-day guidance of the unaccompanied child by:

- making it a recurring conversation topic with the unaccompanied child; and
- making it a discussion topic in the multidisciplinary consultations (cf. Chapter 4. Day-to-day care).