

Detailed specification of the Case Management programme

This document serves only as a template for information for potential applicants. The form to be filled in is available online for download in the information system CEDR. For further information see chap. 2.13 Annexes to the application in the Guideline for Applicants.

Detailed specification of the Case Management programme

Project Title	
Applicant	
Organization	

1. Fundamental client support areas:

Please confirm the commitment to include fundamental client support areas for client stabilization that are set as mandatory in the proposed Case Management programme, by filling in *yes* in the *Included in the project* column. Please further specify the fundamental client support areas in terms of the services to be offered in the Description field.

	Included in the project (yes/no)
The applicant organization commits itself to include below mentioned mandatory fundamental client support areas for client stabilization in the proposed Case Management programme (yes/no).	

Accommodation - assistance in securing accommodation and other essentia material needs
Description

Employment	-	assistance	in	searching	employment,	gaining	and
strengthening	wo	rk habits incl	uding	g acquiring	qualification or	re-qualifica	ation
Description							

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Family - development of functional family relationships and other social contacts	er supportive
Description	
Subsequent professional care - securing subsequent addicto (including substitution therapy)	ological care
Description	
Healthcare - securing healthcare (including psychiatric)	
Description	
2. Additional client support areas	
the proposed Case Management programme. For each of the additional solution stabilization please provide its name and specify it further in the De Additional client support areas may include, for example: development of socialization programmes focusing on specific areas, education programmes of socialization programmes focusing on specific areas, education programmes of specific areas.	escription field.
	etc.
Please provide the name of the area	etc.
Please provide the name of the area Description	PIC.
	PTC.
	erc.
Description	etc.
Description Please provide the name of the area	
Description Please provide the name of the area	
Please provide the name of the area Description	
Please provide the name of the area Description Please provide the name of the area	

Description



3. Territory of the Case Management programme implementation

Select the regional group /regional groups of prisons in which you intend to implement the Case Management programme (by stating yes/no to the below mentioned regional groups of prisons). Applicants intending to implement the Case Management programme in more regions will receive extra points during the quality evaluation. All grant applications must be supported with the mandatory annex in the form of the cooperation commitment document, expressing the agreement with the implementation of the Case Management programme, signed by the prison director of each prison within the selected regional group/regional groups of prisons.

The applicant intend to implement the Case Management programme in below mentioned prisons within the selected regional group / regional groups of prisons (yes/no):			
Ústí region (Bělušice, Všehrdy, Nové Sedlo)			
Karlovy Vary region (Horní Slavkov, Kynšperk nad Ohří, Ostrov)			
South Moravian region (Kuřim, Rapotice, Brno)			
Prague and Central Bohemian region (group 1: Praha – Ruzyně, Oráčov, Vinařice)			
Prague and Central Bohemian region (group 2: Praha – Pankrác, Jiřice, Příbram)			
Moravian-Silesian region (Ostrava, Heřmanice, Karviná)			

4. Frequency and the form of contact with clients

Please confirm the commitment to ensure the optimal frequency and the form of contact with imprisoned clients by filling in *yes* in the *Included in the project* column. Please specify further the frequency and the form of contact with imprisoned clients in the *Description* field.

	Included in the project (yes/no)	
The applicant organization commits itself to ensure the optimal frequency and the form of contact with imprisoned clients within the implementation of the Case Management programme.	yes	
Frequency and the form of contact with imprisoned clients		
Description		

5. Region/ regions of subsequent professional care



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Please confirm the commitment to secure subsequent professional care though the Case Management programme for the released clients returning to either of the six below specified regions, by filling in *yes* in the *Included in the project* column. Please specify further the way of provision of subsequent professional care for released clients in the *Description* field.

	Included in the project (yes/no)
The applicant will secure the provision of subsequent professional care for released clients having returned to the following regions: Ústí region, Karlovy Vary region, South Moravian region, Prague, Central Bohemian region, Moravian-Silesian region.	yes

Central Bohemian region, Moravian-Silesian region.	
Prague	
Description	
Central Bohemian region	
Description	
L	
South Moravian region	
Description	
Ústí region	
Description	
Moravian-Silesian region	
Description	
<u> </u>	
Karlovy Vary region	
Description	



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If relevant, please state other region / regions of the Czech Republic in which you will be able to secure the subsequent professional care through the Case Management programme for released clients. Provide the name of the region and specify further the way of provision of services in the particular region in the *Description* field. Applicants able to secure subsequent professional care though the Case Management programme also in other than above listed regions to which the clients shall return will receive additional points during the quality evaluation.

Name of the region	
Description	

6. Professional / specialized competence of the Case Management programme realization team members

Please confirm the commitment to ensure professional activities by relevant qualified personnel, by filling in *yes* in the *Included in the project* column.

	Included in the project (yes/no)
The applicant organization commits itself to ensure that professional activities within the Case Management programme will be carried out by addictologist, social worker, psychologist and psychiatrist, in accordance with the applicable current legislation in force, standards and good practice. One person may hold several professional qualifications at the same time. The case manager must have the professional competence of a social worker according to § 110 Act No. 108/2006 Coll., on Social Services, as amended.	

7. Solemn Declaration

The applicant hereby declares that all the information included in this annex to the grant application is complete and true.

I am aware of the legal consequences that may result from false or incomplete information. I also confirm with my signature below that I have become acquainted in detail with the conditions for funding stated in the Open Call and the Guideline for Applicants.





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Name and Surname	Date	Signature of the statutory representative or of the authorized person