

Guardian for Children and Young People

Information Paper

What works best in residential care

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**Government
of South Australia**

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In South Australia at 30 June 2008, 166 children and young people on care and protection orders were in residential care. This was 7.6 per cent of all children on care and protection orders.

Residential care can be challenging both for children and young people and workers. Positive experiences are more likely when care is based on what we know from research and past experience.

Opinions about what constitutes good residential care will vary depending on who you ask. For our purposes, good care is measured by how children and young people experience it and its contribution to their everyday life and life outcomes.

Purpose

This short paper provides information to policy makers, managers, social workers and residential care workers on what contributes to a positive residential care experience for children and young people. It is intended to stimulate critical reflection about current practice, including achievements and areas for improvement, and to facilitate practice that demonstrates our commitment to making it work for kids in care.

The Guardian for Children and Young People will use this information to monitor the experiences of children and young people in residential care in South Australia and to promote positive change.

What is residential care?

In Australia, residential care is the co-location of a small number of residents in a communal setting staffed by paid residential care workers (Australian Institute of Health and Welfare 2008).¹ This is distinct from home-based care arrangements where a child or young person lives in a carer's home, such as in foster or kinship care.

Who are the residents?

Generally, children and young people in residential care in South Australia are older than those in home-based care, though there have been children as young as eight years living in residential care. Residents may live in facilities that do not look or feel like a conventional home and a higher number of residents live together compared with other forms of care. Most residents have experienced abuse, trauma and neglect and family-based care has struggled to meet their complex needs and challenging behaviours. Some have experienced disadvantage due to their racial or cultural background. Residents share space but their relationships are not created on a friendship or voluntary basis, nor are they usually kinship relationships. The residential care environment is too often characterised by multiple relationships, instability, complexity and unpredictability.

¹ In South Australia, as many as 12 children and young people can be accommodated in a single facility. This number is too high to promote nurturing, stable, child-centred care, particularly given that many who now enter residential care have high and complex needs.

What works best in residential care***What does research tell us?***

Research is incomplete in telling us conclusively 'what works' in residential care. Several factors contribute to the experience of residential care and the influence of specific features is difficult to determine.² However, as research continues in Australia and overseas, some common points emerge.

1. Residential care works best when it is seen as a positive choice

Residential care should be viewed as a placement option that offers high quality care tailored to residents' individual needs and as a valuable component of an integrated alternative care system.

2. Residential care works best when its purpose is clear

The purpose of residential care and its place in the broader care and protection system should be clear, understood and supported by all. This means:

- each facility has a dedicated function and a clear philosophy of care is demonstrated and supported by staff;
- structures and processes that support function and philosophy are in place at all operational levels;
- facilities have operational guidelines and the care residents receive is monitored and evaluated.

3. A high-quality care environment

The facility should demonstrate and be proud of providing high quality care. Children and young people tell us that they value having 'a say about how [a] house is run' and 'working together' with workers who are 'nice and supportive'. A residence should be a place where 'you get love, care and attention'.³ This means:

- children and young people see and understand the purpose for their time at the facility;
- policy and procedures support children and young people to have a say in their care, including complaints;
- a caring attitude that conveys to residents that they are 'more than a job' is demonstrated consistently by all workers;

² For example, UK studies indicate that high staff/resident ratios or the proportion of professionally qualified staff do not in themselves ensure that a facility will have a positive culture. See Berridge 2002.

³ Quotations are drawn from Commission for Queensland Children and Young People and Child Guardian 2008, *Views of Children and Young People in Residential Care*, Commission for Children and Young People and Child Guardian, Queensland; Special Residential Services Board 2004, *The impact of placement in special care unit settings on the wellbeing of young people and their families*, Special Residential Services Board, Dublin.

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- care promotes safety, stability, continuity and respect;
- the facility has Aboriginal workers who are able to address the needs and experiences of young Aboriginal and Torres Strait Islander people;
- workers receive the supervision, support, feedback and training they need;
- resources are committed to ensure that residential care can provide a high level of in-home support to residents.

4. A positive living environment

Residents and staff should feel good about their environment. Children and young people tell us that the best residential care occurs when the environment 'is like your own home'. In practice, this means:

- facilities and care promote inclusion, safety, comfort, wellbeing, security, belonging, respect for diversity and for individual space;
- residents have recreational equipment and opportunities;
- important events in children's lives are celebrated;
- the needs of the whole resident group influence prospective admissions;
- a maximum of six residents are co-located;
- an optimum staff/resident ratio of 2:5 is maintained.

5. An environment where relationships are valued

Like any home environment, relationships are critical. Children and young people want a place where 'it is nice and you feel safe' and where 'everybody trusts each other'. In residential settings this means:

- children and young people can be themselves and do not need to 'fit' a culture to 'survive';
- residents contribute to a positive environment by being supportive and friendly to one another, not abusive, intimidating, threatening, coercive, hostile or bullying;
- workers contribute to a positive environment by being approachable, respectful, culturally aware, fair, reliable, persistent, engaged, concerned, prepared to listen and responsive.

What works best in residential care**6. The right services**

Residential care works best when services are relevant, accessible and tailored to each resident, rather than the other way around. As one resident says, 'everyone is an individual really, and they treat us all individual.' We would see:

- processes in place to assess children and young people's needs;
- appropriate services tailored to each resident's individual needs;
- residential care facilities fully integrated and working in partnership with health, welfare, vocational, therapeutic, educational and Aboriginal support services.

7. Valuing education

An optimal living environment for children and young people values and promotes education. One resident notes, 'the best thing is that I can have help on planning my future.' Another sees 'the respect that I am given and the help' as positive elements of residential care. This means:

- residential care workers work with social workers and educators to support children and young people to reach their full educational potential;
- educational attainment via school and/or programs is promoted and study areas and materials are provided;
- residential care workers show an interest in education, help with school work and engage with school staff, events and activities in cooperation with case workers.

8. Working with communities and families

Residential care is a place where residents are assisted to take their place in the broader community. Children and young people tell us that residential care should offer both 'support and independence' and facilitate 'trust and freedom'. Residents value 'being close to family and friends' as well as opportunities for 'making other friends'.

We would see:

- residential care workers and social workers working together to assist children and young people to connect to their community, for example through sport, recreation, or artistic pursuits;
- processes in place to support the transition from residential care;
- residential care supporting case workers' efforts to reconnect children and young people with family, to manage family relationships, or to 'make sense' of family dynamics where going home after leaving residential care is not possible;
- Aboriginal and Torres Strait Islander young people assisted with reconnecting with their family, community and culture.

What works best in residential care**Drawn from:**

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