

Right placement, right time?

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Structure of presentation

Context

Evidence

Data without nuance

What we do know?

What are the gaps?

Moving forward

Considerations

Is there a role and purpose for residential care in child welfare systems?

Who, when and how?

Move away from binary comparisons

Family based versus institutions

Placement purpose rather than placement type

Residential children's homes used earlier in the care pathway?

Residential care as a preventative service?

Context

Review of Children's Social Care

Accompanying analysis and thematic reviews

Ofsted research

Why do children go into children's homes? (April 2022)

even though just under half of them were originally supposed to go to destinations other than children's homes, around three quarters were thought to be well matched to the home. This demonstrates the flexibility of many homes to adapt to children's needs.

CMA Children's Social Care Markets report (March 2022)

Research in Practice briefing papers (2020 and 2021)

Context

Contemporary issues

Child sexual and criminal exploitation

Gangs and county lines activities

Deprivation of Liberty (Nuffield FJO reports)

Unregulated placements

Review of Children's Social Care

Children's Social Care Review

Accompanying analysis and thematic reviews

What does it mean for residential care?

Emphasis on early intervention and support as a diversion from care

Review of Children's Social Care

Family Group Decision Making (Section 4.1)

Developing a Family Network Plan

shared care with a foster carer or with *residential care*, who would also help the birth family with parenting support and advice

It should reduce reliance on the *inappropriate* use of residential care for children who would be better cared for in a foster home, and it reduces pressure on foster carers to care for new children

Data without nuance

Looked after children grown up (Sacker et al., 2021)

Headlines:

Poor adult health outcomes for children who grew up in care, especially those who experienced residential care.

The data:

ONS longitudinal data from 1971 to 2011

Sample size of 350,000

Children in care 3,681

Data without nuance

Looked after children grown up (Sacker et al., 2021)

Not included:

Pre-care experience

Disability

Length of residential care placement

Changes over time not accounted for

The report does not make causal inferences

Further information and all outputs from the research available here:

<https://www.nuffieldfoundation.org/project/looked-after-children-grown-up>

Data without nuance

What Works Centre for Children's Social Care: Evidence Store

Systematic review indicates that there are limitations, however, the conclusion reached is...

that better outcomes are attributable to family-based placements

Data without nuance

What Works Centre for Children's Social Care: Evidence Store

The selection criteria omit any UK based studies

Based on a meta-analysis (Strijbosch et al., 2015)

Does not account for needs at entry to placement

Age range of 4-17

Data with nuance

Analysis of outcomes associated with Mulberry Bush (Gutman et al, 2018)

Look internationally?

A meta-analysis of 27 studies from North America, Western Europe and Australia, which focused on residential treatment programmes (Knorth et al., 2007), found that after a period in this type of setting, children on average improved their psychological functioning, with medium and even large effect sizes.

In a rare example of better outcomes from residential (treatment) as opposed to foster care the US-based Boys Town Family Home programme was found to result in lower placement change rates (in comparison with foster care) following placement and better rates of reunification (Lee et al., 2010).

What do we know?

Views and experience of children and young people

“Many believe a family environment is a more suitable placement for a young person to grow up in. That may be the case for lots of young people and children in care, but not for all. Unfortunately, there seems to be a big push for foster care as residential care isn’t viewed as an ideal option, more of a last resort if they can’t find another suitable placement. That attitude needs to change, residential care homes work for a number of young people for reasons that are probably far too complicated than I can ever fully explain. But I do know that for me and a number of other young people, care homes were the BEST option, not the last resort option and they did some amazing work with us during our time there.”

(Care leaver quoted in Narey, 2016, p. 5).



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What do we know?

Culture of care

Positive relationships with staff

Creation of 'home' environment

Family engagement

Staff wellbeing

Therapy or therapeutic?

“Therapeutic residential care’ involves the planful use of a purposefully constructed, multi-dimensional living environment designed to enhance or provide treatment, education, socialization, support, and protection to children and youth with identified mental health or behavioural needs in partnership with their families and in collaboration with a full spectrum of community-based formal and informal helping resources”.

(Whittaker, Del Valle and Holmes, 2014)

No Wrong Door

What is it?

Integrated service for young people with complex needs

Team of specialists working together through a shared practice framework

Key worker relationship with young people is at the heart of the approach

Residential hubs AND in-home support in the community

Who is it for?

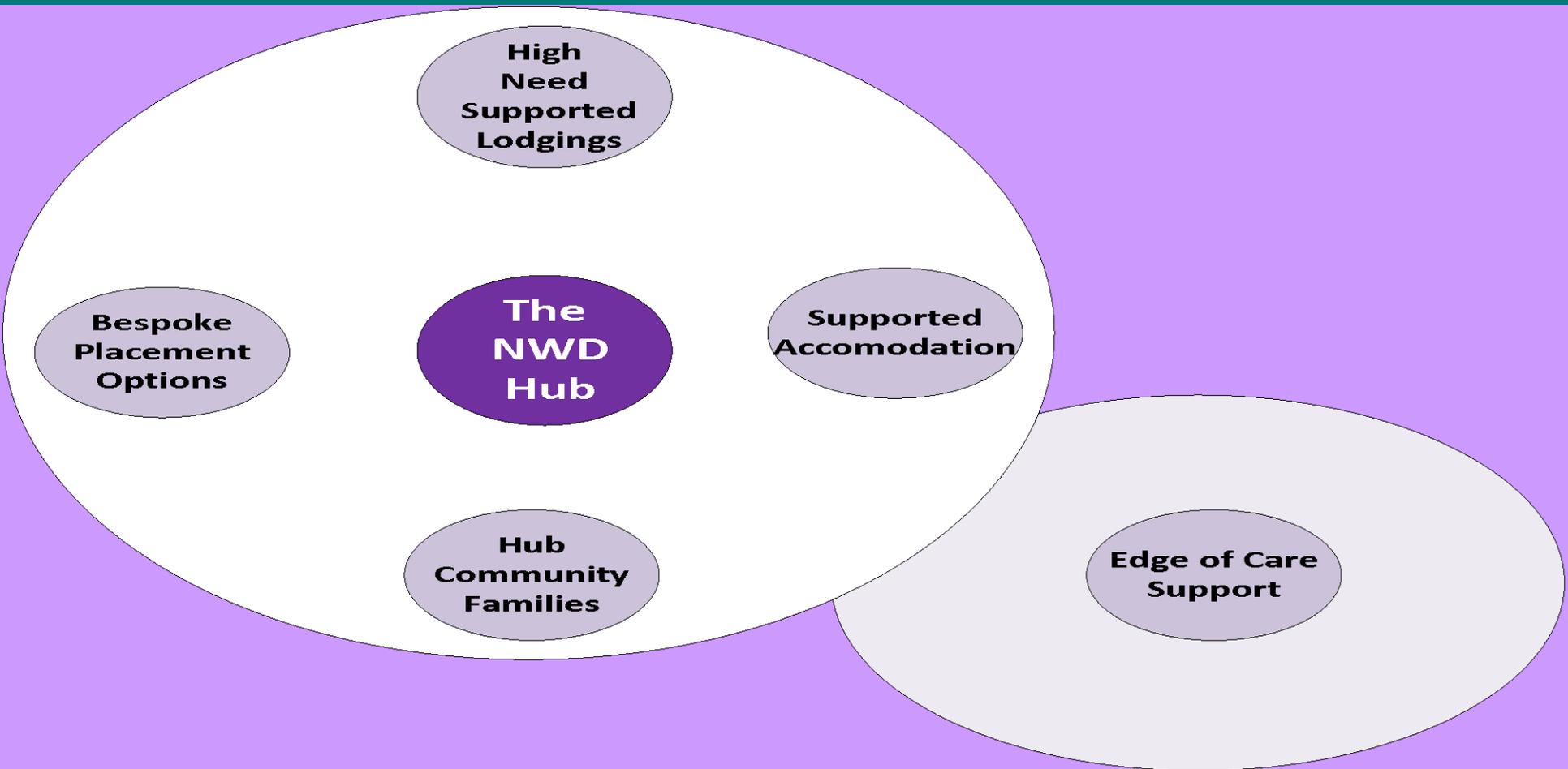
Young people aged 12 to 25

Those already in placements (some risk of instability)

Those at imminent risk of needing placement

Those moving towards imminent risk of needing placement

No Wrong Door



No Wrong Door

Commitment to evidence generation at the outset

Co-creation of a child-level data tracker

External evaluation concluded in 2017

Ongoing data tracking and use of evidence to refine operational practice and inform strategic decisions

How can this approach to practice-driven evidence generation be replicated?

Who owns the data?

Longer-term follow-up?

Pump priming funds to set up systems

Evidence gaps

Two fundamental issues that are missing in the evidence base are, the degree to which residential care being used as a last resort is real or perceived and whether the timing of residential placements is based on strategic, values-based decision to focus on ‘family first’ placements, or is driven by a lack of available, high-quality residential provision.

Points for discussion

Is there a role and purpose for residential care in child welfare systems?

For whom, when and how?

Can residential care be utilised as a preventative service?

How to align the fluidity of approaches such as No Wrong Door with 'rigid' child welfare systems?

How do we evidence purposeful use of residential care?

How do we determine value for money?

Differentiation between the investment and the saving