

Residential Care Services for Children

Tabled 26 March 2014

Background

- On any given day there are around 500 children in residential care in Victoria.
- Residential care involves placing a small number of children—usually no more than four—together in a house with paid staff who provide 24 hour care.
- Children are generally between 12 and 17 years old, although there are some children who are under 12.
- Children have experienced traumatic circumstances and exhibit challenging behaviour.

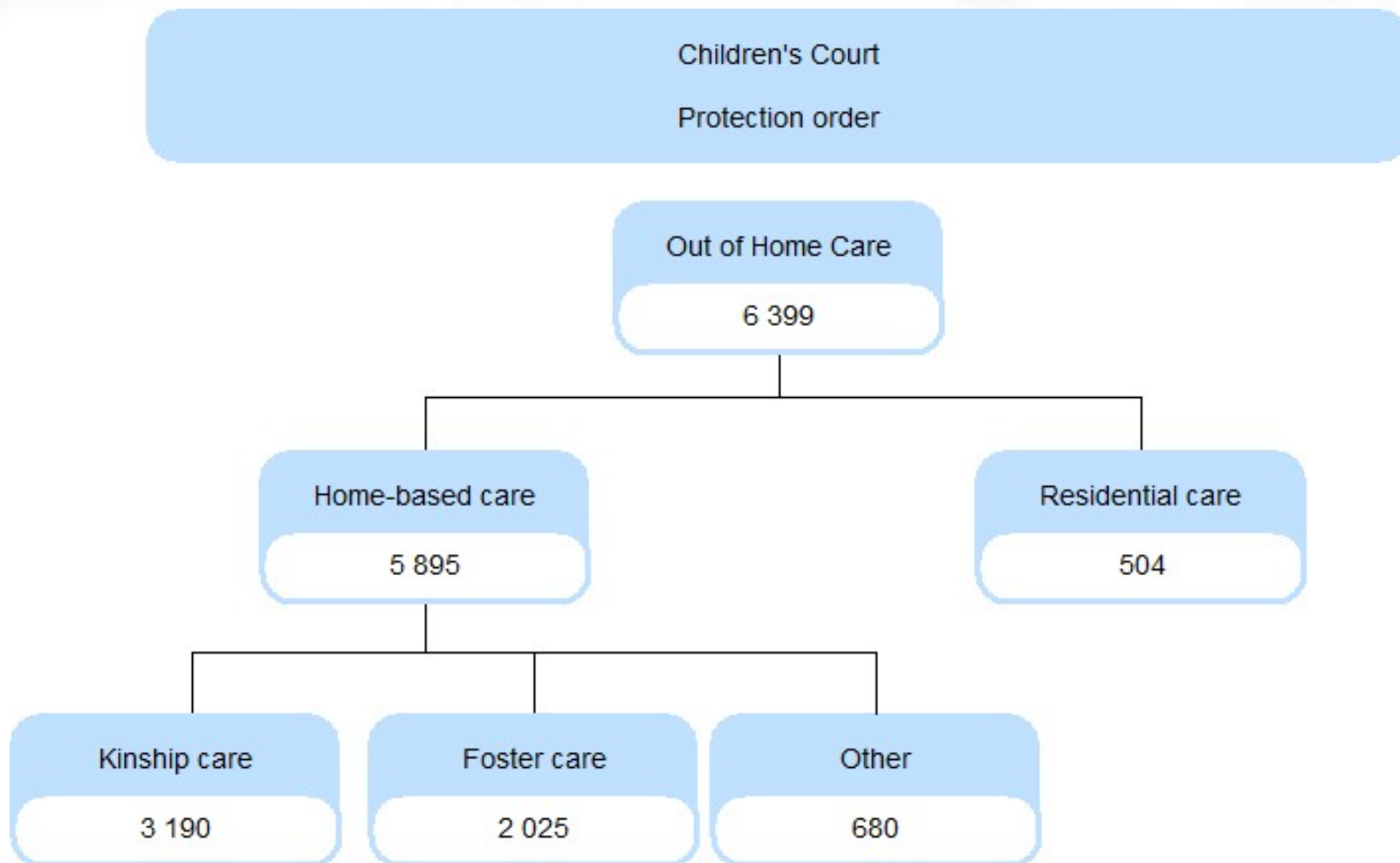
Snapshot of children in residential care

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On 30 June 2013:

- 504 children in residential care
- 211 girls and 293 boys
- average age of 14 years
- 65 children under 12 years
- average age of nine when first placed in Out of Home Care (OOHC)
- almost half with a sibling.

Types of care: Out of Home Care system as at 30 June 2013



Source: Victorian Auditor-General's Office based on Productivity Commission Report on Government Services (2014) data.

Audit objective

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To examine the effectiveness of the Department of Human Services' residential care services for children.

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In particular, we looked at whether:

- children are in appropriate residential care that meets their needs, including safety, stability and personal development
- the residential care system is subject to effective oversight and review:
 - there is effective oversight of the children's wellbeing
 - the department supports service providers to adapt and share good practice to meet children's needs.

Audit scope and methodology

- The audit focused on the department's planning, monitoring and oversight activities for residential care services.
- We did **not** look at kinship or foster care.
- We collected evidence from a range of sources including:
 - departmental documents
 - interviews
 - focus group discussions
 - site visits
 - case file reviews.

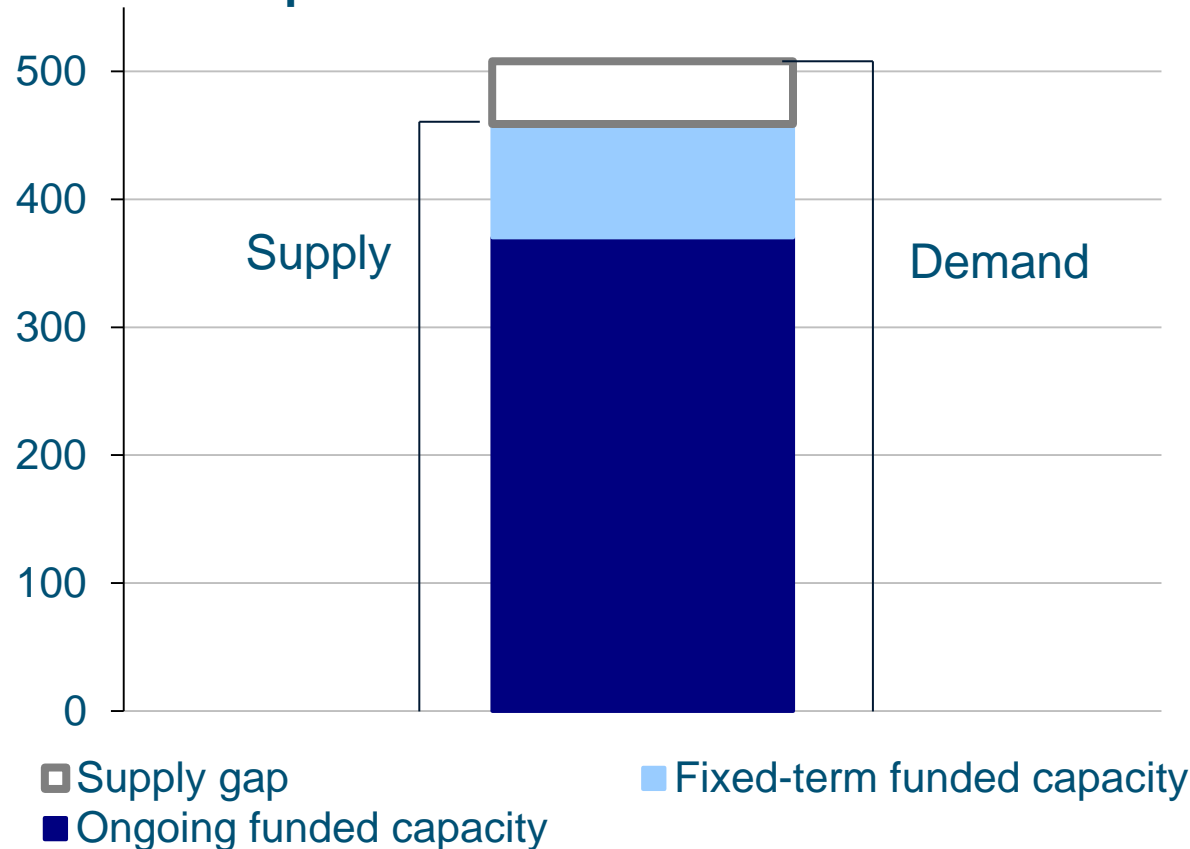
Conclusions

- The system is unable to respond to the level of demand or the growing complexity of children's needs.
- The department is paying a premium to place children in residential care outside the planned capacity of the system.
- Outcomes for children in residential care are poor across a range of indicators.

Findings – The system is operating over capacity

- Operating over capacity means the department needs to fund additional places and pay more to service providers for staff time and other costs.
- In 2012–13, the department planned for 459 residential care placements.
- However, the audit found an average of 508 children in residential care on any given day.

Number of placements



Findings – Residential care costs are significant

- Residential care services cost over \$100 million annually.
- In 2013–14, the annual cost of a residential care placement ranges from \$162 880 for an intermediate placement, to \$308 028 for a complex therapeutic placement.
- Some placements for children with highly complex needs cost up to \$1 million.
- In 2012–13, the department purchased additional placements at a cost of \$24 million.

Findings – Inadequate monitoring and staff models

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Performance monitoring is inadequate:

- The department does not systematically monitor outcomes for the whole residential care population.
- Service providers report on outputs not outcomes.

Residential care staff need to be better trained, qualified and supported:

- There are no mandatory qualifications.
- There is a high percentage of casual staff.
- There is a high turnover of staff.
- Staff members often work alone on a shift until handover.

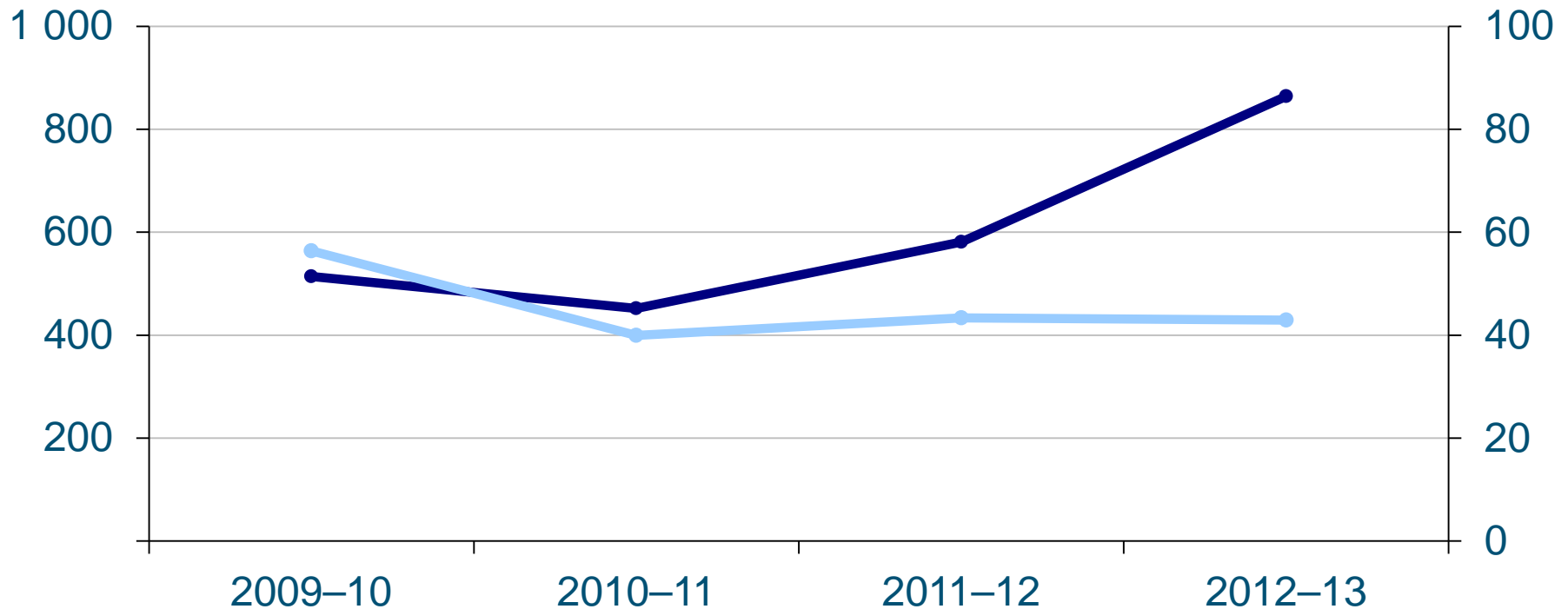
Findings – Children's needs are not always being met

- A shortage of beds affects placement decision-making—this can affect a child's safety, stability and reduce opportunities to achieve positive outcomes.
- Children in residential care have a disproportionately high number of critical incidents.
- There was a 49 per cent increase in the number of Category One incidents reported in residential care from 2011–12 to 2012–13.
 - This was due largely to absent/missing person reports.
- Children who abscond are at risk of sexual exploitation.

Category one incidents in residential care, 2009–13

Number

Per cent



—●— Incidents in residential care

—●— Incidents in residential care as a percentage of all OOHC incidents

Findings – Children's needs are not always being met

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Children in therapeutic residential care have better outcomes than children in the standard model of care partly because:

- staff have access to a therapeutic specialist
- placement is planned which enables children to be carefully placed with other children.

There is no independent body that advocates for, or hears the complaints of, individual children.

Recommendations

		Accept
That the Department of Human Services:		
1.	establishes alternative affordable models with sufficient flexibility to cater for the varying and complex needs of children	✓
2.	actively promotes to children in residential care the processes for making a complaint; and investigates the feasibility of establishing an independent advocacy role to support children in residential care	✓
3.	develops performance measures for delivery of residential care services for children to meet legislative requirements and outcomes for children.	✓

Recommendations – *continued*

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		Accept
That the Department of Human Services:		
4.	ensures that residential care staff have the necessary skills, qualifications, training and support to work effectively with children and their families	✓
5.	identifies systems and processes for collecting and analysing information which better meet the department's compliance, assurance and reporting needs	✓
6.	reviews existing demand forecasting approaches and develops plans for the capacity that is actually required.	✓

Other relevant VAGO audits

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Past audit

Our children are our future: Improving outcomes for children and young people in Out of Home Care (2005)

Future audit

Early intervention for children at risk

Contact details

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