



## Reducing Reliance on Congregate Care: Our Priorities

*Adopted April 24, 2016*

### **Overview**

There has been a growing need to further reduce the number of young people placed in congregate care settings. Recent federal legislative proposals seek to reduce reliance on congregate care placement of foster youth. The members of the National Foster Youth and Alumni Policy Council are interested in ensuring the perspective of young people who have first-hand experience in congregate care is considered by policy makers, child welfare administrators and professionals, and advocates as policies regarding congregate care placements are shaped.

The Council reviewed previous recommendations, evaluated key research publication on the outcomes of congregate care placements, and conducted round table discussions with alumni who have experience in congregate care settings in order to establish these priorities.

The term 'congregate care' is used to describe a long list of placement types to include shelters, specialized groups homes, and residential treatment facilities. Council members reflected on their varying experiences in congregate care and members unanimously agree with following priority statements:

- A. States should make efforts to prevent disruptions and ensure placement in congregate care is appropriate
- B. Establishing lifelong connections should be a priority for children placed in congregate care settings

Following are specific Council priorities aimed at reducing reliance on congregate care:

### PREVENTING DISRUPTIONS AND IMPROVING OVERSIGHT ON CONGREGATE CARE PLACEMENTS

1. **Improve oversight of placement into congregate care.** A Team Decision Meeting (TDM) or a Child and Family Team meeting should be required to determine if congregate care placement is appropriate and in the best interest of the child (excluding very short-term emergency/temporary/transitional congregate care placements). These meetings should always include the young person, unless impossible to do so, and the young person should be allowed to invite supportive adults in their lives to the meeting. All parties to the case should be notified, including the courts, within 72 hours.

*“One of my placements included a treatment foster care facility. This placement included the most difficult situations I ever encountered in my years. It was not stable. The home had anywhere between 4-7 girls at one time with high turnover rates. In one month, 15 girls could pass through. The foster youths were treated like laborers to care for the home and land of the owners. There is little to no*

*monitoring of the placements. There is no consideration for compatibility. Youth are moved from place to place as a means to solve conflict.” – Shakela*

2. **Provide mediation services to prevent and reduce placement disruptions.** Provide facilitation or mediation to ‘save a placement’ and prevent disruption (which often results in placement in CC). Trained mediators should help to repair relationships, ensure youth development takes place, and allow youth an opportunity to recover the placement. In the event a replacement can’t be saved, mediation would also provide a young person with an opportunity for closure. Skilled facilitators can also observe foster parent/caregiver skills, provide training and support to improve the caregiver's ability to manage youth.
3. **Provide trauma informed training and supportive services to resource families and caseworkers.** Trauma can cause young people to exhibit hard-to-manage behaviors. Providing foster parents, relative caregivers, and congregate care staff with evidence based training on trauma informed care would significantly reduce placement disruptions. Trauma informed care would provide the skills necessary for caregivers to recognize, understand and respond appropriately to the needs of children experiencing trauma. Training should include developing cultural competencies as well as addressing the unique needs of LGBTQ youth and adolescents. Agency workers are vital in the reduction of placement disruptions and reducing the reliance on congregate care. By incorporating a trauma-informed approach in placement decisions, agency workers can assess the appropriateness of placement options and identify resources to support caregivers.
4. **Disallow placement as a punishment.** Placement in congregate care shouldn’t be allowed to be used as a punishment for behavior. Young people should be provided a complete, youth-friendly explanation about the types of services and special supports that will be made available in the congregate care that wouldn’t be available in an average foster home. Facilitation or mediation services should be provided between the youth and foster parent(s) to prevent disruption (which often results in placement in congregate care). In the event the foster home placement can’t be saved, this process would provide a young person with closure.

*“When I was initially placed in foster care, the agency did not have resource families that could take in 4 children so we were split into pairs. My first foster parent was ill equipped to handle our trauma behaviors and placement was disrupted. My sister and I were placed into sibling group home because there were no available placement options that can take a sibling group of two. We were discharged after 3 months as they found no clinical reasons to keep us in congregate care.” — Madison*

#### PROMOTING PERMANENCY FOR YOUNG PEOPLE IN CONGREGATE CARE

1. **Support family finding and strengthening family connections.** Accelerate family finding for youth in congregate care. Revisit family connections for youth in congregate care settings, and look to strengthen relationships with relatives EVEN IF they cannot serve as a placement. For older youth, reconsider parents who had parental rights terminated (TPR) earlier in the youth’s life – as circumstances may have changed for the parent and the youth. Also consider strengthening connections to siblings and fictive kin (people not related by blood, but considered to have family-like connections). When family is known, provide opportunity for more family connections while in the congregate care setting. Provide a young person with more visits, more often. Involve family in a youth’s treatment plan. Youth should be allowed to provide a visitors list within 24 hours. Visitation should NEVER be

limited for a youth (such as a punishment for misbehavior). Youth should be allowed to use technology and social media in order to stay connected to their community and support system. Family relationships should be treated as a right - not a privilege.

- Promote relationships with 'outside' supportive adults.** Too often youth rely upon time-limited adult relationships such as paid staff and agency workers. It is critically important that youth are provided the opportunities to form lifelong relationships with supportive adults in the community. By intentionally engaging youth in community activities that involves interactions with supportive adults, youth are more likely to foster trust in others, build self-esteem, develop a sense of self-worth, and learn how to form healthy attachments with the adults in their lives. Activities may include mentorship programs, church engagement, and internship/work related programs. A Permanency Pact can be utilized as a tool to establish and solidify the lifelong relationship.

*“While in a residential facility I was only allowed to talk to people on a list. One day someone not on the list called and I bolted with the phone, yelling into it what they needed to do to be on the list. That connection became my adoptive mom, but that situation could have easily have scared her away or prevented a connection in the first place.” — Jessica*

- Provide step-down services to integrate children from congregate care to a less restrictive environment.** Youth in congregate care settings should receive a step-down/transitional plan that would prepare them to live with a family or to be engaged in healthy relationships. The step down plan must include services designed to help a young person understand how to manage their emotions and trauma-related behavior, how to form healthy attachments by building trust, and how to reintegrate into a healthy family environment upon exiting congregate care. An example of a tool that could be used: Teen Success Agreement [http://jlc.org/sites/default/files/topic\\_related\\_docs/Teen%20Success%20Agreement%20Packet%208%2029%2012.pdf](http://jlc.org/sites/default/files/topic_related_docs/Teen%20Success%20Agreement%20Packet%208%2029%2012.pdf)

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#### **About the Council:**

*The National Foster Care Youth and Alumni Council convenes to provide federal stakeholders with relevant and timely information as policies and procedures are created that will affect children and families throughout the country. The Council represents a collective viewpoint of youth and alumni who have experienced the child welfare system first-hand. The Council is a partnership between Foster Care Alumni of America and FosterClub, with generous support from Casey Family Programs.*