CAN WE PLAN FOR FOSTER CARE
Or do we just have to cope with what comes through the door?

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1. MATCHING NEEDS AND SERVICES

- Children in foster care vary enormousl – by needs, age, reasons for care, length of stay, family contacts etc.
- Therefore 'No one size fits all'
- Matching Needs and Services is a method to help understand better the needs of children in care and plan services
- The focus is on NEEDS and SERVICES THAT MEET THEM, and not on other background characteristics of children or service organisation

2. FIRST: analyse the needs of the children coming into care (or any population, e.g. those in care already, long-stay, teenagers, protection cases)
   SEE DOCUMENT 1

3. Then identify groups of children with similar needs
   Use statistical cluster for this
   This identifies discrete 'needs groups'
   SEE DOCUMENT 2

4. Look at the needs of children in each iof the needs groups
   Look at the pattern in each group
   SEE DOCUMENT 3

5. Compile a profile of the needs of children in each group
   SEE DOCUMENT 4

6. Then review existing services and and design new ones

   For each needs group, ask the following questions:
   What are the needs of this group?
   What do we wish to achieve for these children in five areas of their lives (living situation; family and social relationships; social and anti-social behaviour; physical and mental health; education and employment)?
   What services does research show best achieve these aims?
   What thresholds need to be put in place to help professionals identify suitable children, to make sure that the right children get the right services and to ensure consistent responses to children and families presenting similar needs?
   What support in terms of administrative structures, management and training need to be put in place to make the services work?

How does the envisaged service compare with what the children and families in the needs group already receive?

7. What this exercise offers:

- Better information based on a structured analysis of the needs of children coming into care over a specified period (e.g. one year)
- Useful for planning as this is unlikely to change much in future years
- A more accurate estimate of the numbers of children with particular needs
- A better indication of the links between different needs
- A method of designing services that:
  puts children's and families' needs first and perceives administrative structures, training and management as facilitators rather than as ends in themselves and
  produces services that are needs-led and evidence–based and so are likely to meet the needs of different groups of children more effectively

8. Examples of changes indeicated by the exercise:

Better balance between prevention-early intervention-treatment-social intervention
History of previous involvement (or lack of it) highlights points at which earlier or different interventions might have prevented admissions to care

Effective responses to acute and emergency situations
Half of admissions are emergency

Greater understanding of the co-morbidity of needs
How children causing concern in one area, e.g. for abuse or neglect, have other needs in other areas, e.g. health, education.

Groups that might be diverted from care
Adolescents with presenting challenging behaviour
Families at risk of breakdown

Stronger links between research evidence and service design

APPENDIX:
AN EXAMPLE OF THE METHODOLOGY APPLIED TO A SAMPLE OF SEQUENTIAL ENTRANTS TO CARE IN A UK LOCAL AUTHORITY

DOCUMENT 1

A LOCAL AUTHORITY CHILDREN'S SERVICES DEPARTMENT IN ENGLAND
(An industrial town within a large conurbation, population 250,000)

CHILDREN NEWLY ADMITTED TO CARE
A SEQUENTIAL SAMPLE OF 99 ENTRIES

Total cases **99**

Characteristics and history		Situation on entry	
Gender (% male)	54	Single parent family	42
Ethnicity (% white British)	77	Both parents at home	18
Legal status (% compulsory)	45	Step parent	19
Unborn child	3	Only child	34
On protection register now	32	3+ siblings	21
On protection register in past	21		
Previously in care	19	Overcrowded home	11
Past service involvement	88	Poor accommodation	17
		Frequent movement	14
Placed with sibling	34	Temporary housing	7
Ongoing protection enquiries	54	Family new to area	11
Emergency admission	51	Low income	57
		Debt problems	27
Age on admission		Ever homeless	5
0-1	27	Socially isolated	28
2-3	12		
4-5	9	Place to stay other than home	35
6-11	23	Child always lived in one place	61
12-12+	28	Good social links in home area	55
		Good local support	19
Who referred case?			
Child	2	Poor relations child/mother	46
Parent/relative	21	Poor relations child/father	50
Social worker (in-house)	13	Poor relations child/siblings	18
Education	5	Mother absent/dead	4
Health	27	Father absent/dead	27
Police	23		
Other local authority	4	Child recently harmed	58
Voluntary NGO organisation	1	-by mother	48
		-by father	27
		-by others	8

Nature of harm – sexual	8
-emotional	18
-physical	20
Poor parenting	50
Neglect	39
Low warmth- high criticism	13

No obvious harm	15

Someone loves the child	80

Adult other than parent cares	44
Adults have skills to cope	14
Child understands family's problems	14

Family discord	72
Breakdown/divorce	47
Domestic violence	41
No significant adult for child	10

Poor relations with services	12

ADULTS		**CHILD**	
Aggressive at home	45	Aggressive at home	26
Aggressive in community	7	Aggressive at school	19
Violent at home	37	Inappropriate sexual behaviour	9
Violent in community	8	Lack of social network	13
Inapproiate sexual behaviour	16	Early age behaviour problems	13
Convicted of serious offence	21	Behaviour problems -at home	33
Convicyed of minor offence	11	-at school	26
Petty crime	9	-in community	11
Prostitution	1	Poor peer relationships	17
Acute mental health problem	5	Mental health problem	4
Learning disability	12	Physical health problem	1
Physical disability	2	Learning disability	7
Alcohol abuse	24	Physical disability	0
Drug abuse	12	History of self harm	3
History of self-harm	8	Suicidal	2
Suicidal	6	Alcohol misuse	5
Depressed	33	Drug misuse	6
Stress/inability to cope	69	Stress/inability to cope	6
Unhappy	39	Unhappy	28
Isolated	40	Developmental delay	19
Pregnant	20	ADHD	5
Unemployed	61	Isolated	19
		Autism	2
		Enuresis/encopresis	8

Pregnant	3

CHILD'S EDUCATION

In mainstream school	41
Under five – in preschool	16
Under five – not in preschool	19
Full time special school	4
Part-time special school	1
Part-time mainstream school	2
Statement of special need	7
Special need but no statement	4
Left school	4
Employed	0
Training scheme	0
Permanently excluded	6
Temporarily excluded	7
Underachiever	15
Poor relations with teachers	13
Bullies other children	11
Bullied by others	4
Experiences racism	2
Isolated	15
Poor attendance	15
Above average ability	2
Hard working	12
Talented	3
Likes school	20
Liked by pupils	20
Liked by teachers	25
Parents invovled in education	9
Has hobbies/interests	10

CHILD'S SOCIAL SKILLS

Pleasant to be with	42
Wants to change behaviour	15
Confidence to solve problems	8
Social skills with people	17
Has someone to trust	21

ADULTS HAVE NEEDS IN

Living situation	43
Family and social relationships	75
Social/anti-social behaviour	33
Physical/mental health	58
Education/employment	40

SERVICES ACCEPTED   95

CHILD HAS NEEDS IN

Living situation	49
Family and social relationships	68
Social/anti-social behaviour	30
Physical/mental health	36
Education/employment	23

FIRST PLAN FOR CHILD

Return home quickly	23
Live with relatives	6
Long-stay substitute care	29
Permanent placement	13
Independent Living	2
Other	5

DOCUMENT 2

IDENTIFYING GROUPS OF CHILDREN WITH SIMILAR NEEDS

Group One
Young children in families where the need is to alleviate stress and poor living situations in order to improve parenting

Group Two
Children for whom the need is to reduce the risks and consequences of chronic family discord and violence

Group Three
Older children whose needs require help to improve their behaviour in a range of areas and contexts

Group Four
Children who need protection from risks of harm and help to recover from the effects of serious abuse and neglect

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DOCUMENT 3

STATISTICAL DETAILS OF THE BACKGROUND CHARACTERSITICS OF THE CHILDREN IN EACH GROUP

NEED GROUPS	1	2	3	4		ALL
TOTAL CASES IN EACH GROUP	31	33	14	21		99
Figures below are all percentages						
Gender (% Male)	45	58	64	52		54
Ethnicity (% White UK)	74	76	71	86		77
Legal status (% care order)	29	55	21	71		45
Unborn child	3	6	0	0		3
On CP Register now	39	36	7	33		32
On CP Register in past	10	15	36	40		21
Previously looked after	19	18	21	19		19
Previous CS involvement	90	79	86	100		88
Placed with sibling	26	45	7	48		34
Protection enquiries pre-care	52	45	43	76		54
Looked after in emergency	52	39	57	62		51
AGE ON ADMISSION						
0-1 years	39	30	0	24		27
2-3 years	17	15	0	10		12
4-5 years	3	15	0	15		9
6-11 years	12	30	21	30		23
12-12+ years	29	9	78	24		28
WHO MADE REFERRAL						
Child	3	0	7	0		2
Parent/relative	28	9	50	14		21
Social services (in-house)	24	12	7	5		13
Education	7	6	7	0		5
Health	31	27	0	43		27
Police	3	33	29	33		23
Other local authority	0	12	0	0		4
Voluntary organisation	3	0	0	0		1
SITUATION ON ENTRY TO CARE						
Single parent family	36	55	50	29		42
Both birth parents living in home	16	18	7	29		18
Step parent	23	21	29	5		19

Other family situation	26	6	14	38	20
Only child	48	30	21	29	34
More than three siblings	32	27	7	5	21
Overcrowded home	26	0	14	5	11
Substandard accommodation	23	12	21	14	17
Frequent movement	29	0	7	19	14
Temporary accommodation	6	9	0	10	7
Family new to area	16	12	0	10	11
Low income	68	67	21	48	57
Debt problems	10	48	7	33	27
Ever homeless	10	6	0	0	5
Socially isolated	39	3	0	71	28
Place to stay other than home	16	52	43	29	35
Child always lived in one place	48	67	71	62	61
Good social links in home area	55	61	71	33	55
Good local support	23	12	36	14	19
Poor relations with mother (if in contact)	13	35	92	81	46
Poor relations with father (if in contact)	13	52	89	71	50
Poor relations w. siblings (if has sibs)	8	15	60	7	18
Mother absent/dead	3	6	7	0	4
Father absent/dead	26	30	36	19	27
Child recently ill-treated	42	79	29	67	58
Harm caused by mother	32	61	29	67	48
Harm caused by father	26	30	0	38	27
Harm caused by others	6	6	7	14	8
Nature of any harm: sexual	0	6	0	29	8
Emotional	10	12	14	43	18
Physical	29	18	14	14	20
Poor parenting	39	64	21	62	50
Neglect	32	49	7	57	39
Low warmth-high criticism	3	15	14	24	13
No obvious harm	26	6	21	10	15
Someone loves the child	77	76	71	95	80
Significant adult other than parent cares	23	48	29	81	44
Adults have skills to cope	13	18	0	19	14
Child understands family's	16	3	29	19	14

problems						
Family discord	58	88	100	48		72
Breakdown/divorce	39	58	64	29		47
Domestic violence	26	76	29	19		41
No significant adult	7	0	29	19		10
Poor relationship with peers	0	18	43	24		17
Poor relationships with professionals	0	3	57	14		12
CHILD						
Aggressive at home	10	21	93	14		26
Aggressive at school	6	9	86	10		19
Aggressive at community	0	3	50	0		8
Violent at home	3	3	36	5		8
Violent at school	3	0	14	0		3
Violent in community	0	0	7	0		1
Convicted of serious offence	0	0	14	5		3
Convicted of minor offence	3	3	29	5		7
Petty crime	0	0	21	14		6
Runs away	0	9	50	0		10
Inappropriate sexual behaviour	3	3	36	10		9
Lack of social network	3	3	43	14		13
Early onset anti-social behaviour	6	9	36	14		13
Behaviour problems at home	16	27	93	29		33
Behaviour problems at school	6	21	79	29		26
Behaviour problems in community	0	3	64	5		11
Pleasant to be with	55	18	14	81		42
Teachers see a likeable	29	0	7	67		22
Wants to change behaviour	16	3	29	24		15
Confidence to solve problems	16	0	7	10		8
Social skills with people outside family	16	6	7	43		17
Someone to trust	19	24	0	33		21
ADULTS						
Aggressive at home	29	70	43	33		45
Aggressive at community	14	0	0	19		7
Violence at home	26	55	29	33		37
Violence in community	6	6	0	19		8
Inappropriate sexual behaviour	13	18	0	29		16
Convicted of serious offence	26	27	0	19		21

Convicted of minor offence	10	18	0	10	11
Petty crime	6	12	0	14	9
Prostitution	3	0	0	0	1
Chronic mental health problems	13	21	0	29	17
Acute mental health problem	3	6	14	0	5
Chronic physical health problems	0	9	0	0	3
Acute physical health problem	0	0	0	0	0
Learning disability	6	18	0	19	12
Physical disability	6	0	0	0	2
Alcohol abuse	10	33	14	38	24
Drug abuse	16	9	0	19	12
History of self harm	3	12	0	14	8
Suicidal	3	9	0	10	6
Depressed	9	36	29	67	33
Stress/inability to cope	68	76	64	62	69
Unhappy	16	58	50	38	39
Isolated	45	30	29	57	40
Pregnant	26	30	14	0	20
CHILD					
Chronic mental health problem	0	0	0	5	1
Acute mental health problem	0	3	7	0	2
Chronic physical health problem	0	6	0	10	4
Temporary physical health problem	0	3	0	0	1
Learning disability	6	3	7	14	7
Physical disability	0	0	0	0	0
History of self harm	0	3	7	5	3
Suicidal	0	0	7	5	2
Alcohol misuse	0	0	36	0	5
Drug misuse	0	0	36	5	6
Stress/inability to cope	0	6	21	5	6
Unhappy	13	21	71	33	28
Developmental delay	23	21	7	19	19
ADHD	3	3	21	0	5
Isolated	3	18	43	29	19
Autism	3	0	0	5	2
Enuresis/encopresis	0	15	0	14	8
Pregnant	0	9	0	0	3
CHILD'S EDUCATION					
Full-time mainstream school	32	39	71	38	41
Under five: in pre-school	26	12	0	19	16
Under five: not in pre-school	18	30	0	14	19

Full-time special school	3	0	14	5	4
Part-time special school	0	0	7	0	1
Part-time mainstream	0	3	0	5	2
Statemented	6	3	7	14	7
SEN but not statemented	0	0	14	10	4
Left school	3	3	7	5	4
Employed	0	0	0	0	0
Training scheme	0	0	0	0	0
Permanently excluded	0	0	43	0	6
Temporarily excluded	3	3	29	5	7
Underachiever in education	0	0	64	29	15
Poor relationships with teachers	3	3	79	0	13
Bullies other children	0	3	64	5	11
Bullied by others	6	3	0	5	4
Experiences racism	0	0	14	0	2
Isolated	6	18	36	10	15
Truants	3	3	79	10	15
Above average ability	3	0	0	5	2
Hard working	16	0	0	33	12
Talented	3	0	0	10	3
Likes school	32	9	0	33	20
Liked by pupils	23	12	0	43	20
Liked by teachers	26	15	7	52	25
Parents involved in child's education	13	0	14	14	9
Has hobbies/interests	19	0	7	14	10
ADULT EMPLOYMENT					
No adults in employment	68	67	50	48	61
ADULTS HAVE NEEDS IN:					
Living situation	32	42	29	71	43
Family and social relationships	81	61	93	76	75
Social/anti-social behaviour	35	21	21	57	33
Physical/psychological health	42	76	36	67	58
Education/employment	35	58	0	48	40
CHILD HAS NEEDS IN:					
Living situation	48	30	57	76	49
Family and social relationships	65	52	100	76	68
Social/anti-social behaviour	6	15	100	43	30
Physical/psychological health	10	42	79	38	36
Education/employment	16	3	86	24	23

SERVICES ACCEPTED						
Fully	97	100	79	95		95
PLAN FOR THE CHILD						
Return home	39	21	29	0		23
Live with relatives	6	0	0	19		6
Stay in placement	13	45	43	19		29
Permanent placement	10	3	0	43		13
Independent living	3	0	0	5		2
Other	6	9	0	0		5
PLAN FOR PERMANENCY LIKELY	23	15	0	48		22

DOCUMENT 4

MORE DETAIL OF THE CHILDREN IN EACH GROUP

Group One

> Young children in families where the need is to alleviate stress and poor living situations in order to improve parenting

Nearly one third (31%) of the 99 children scrutinised fell into this group where their families were under stress and living in poor circumstances that made it difficult for them to cope. There were problems associated with poverty (68%[1] had low incomes), 26% lived in crowded accommodation, 29% had moved frequently and for 26% pregnancy exacerbated an already difficult situation.

Just over half (55%) of the children were girls and most (81%) were accommodated under voluntary arrangements. Thirty nine per cent were under the age of two on admission to accommodation and the referrals came equally from social services, health and parents. Nearly half of the children (48%) were the only children in the family.

Difficult family relationships and serious abuse were not salient issues compared with some other children, although more (29%) had been physically abused than for any other group. Domestic violence and family breakdown were also relatively low compared with the rest of the study population.

Only one in ten of the children needed help with behaviour and, apart from convictions for a serious offence (26%), the parents displayed the lowest levels of any group for depression, alcohol and drug abuse and unhappiness. Given the children's young ages, schooling problems were rarely a major issue.

Group Two

> Children for whom the need is to reduce the risks and consequences of chronic family discord and violence

This was the largest group of children, comprising a third of the sample. The children have many needs in common with Group One but the important differences are the high levels of domestic violence and the need to address its effects on children's development and behaviour. In addition, the children's ages are more widely spread, siblings are more likely to be involved and admission undertaken by out of hours duty teams following police referrals. The commitment by agencies to the care of these children is, therefore, longer.

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[1] For the sake of simplicity, comparisons are made between the figure for the group and the figure for the whole sample. A more accurate comparison would be between the group and the rest of the 99 children in the sample. This would have the effects of increasing the contrasts. In addition, when comparisons are made, it is usually relative to other looked after children and not the national population, most of whom are much less disadvantaged.

Over half of the children in this group (55%) were living in single parent families at the time of admission and there were frequently issues of debt (48%) rather than the quality of housing. Levels of harm were high (79%) mostly due to chronic neglect and poor parenting compounded by domestic violence in 76% of cases. The children were more aggressive than those in Group One, echoing their violent carers by presenting more difficulties at home and school. Compared with the adults in Group One, parents were equally likely to have been convicted for a serious offence but displayed much higher levels of depression, alcohol abuse, learning difficulties, unhappiness and other mental health problems. More of these children are placed with relatives and there is expectation of a longer term commitment to their welfare.

Group Three

> Older children whose needs require help to improve their behaviour in a range of areas and contexts

The third group, comprising 14 children, two-thirds of them boys, is easy to identify. They are older children with a variety of complex needs and presenting a range of serious problems.

Harm by parents is less of an issue for this group. It might have been in the past (36% had previously had their names placed on the child protection register) but only 21% of the children have recently been obviously harmed in any way. Levels of neglect are also lower than for the other children in the sample. Moreover, in the 50% of cases, it was the parents who first contacted Children's Services for help.

Compared with the sample as a whole, the children are older on admission to care and accommodation (78% over 11). Siblings are rarely accommodated at the same time. As many as 50% come from single parent families and 29% from step-families, all coping with a range of difficult behaviours and disabilities. The young people score the highest of all the groups on every measure of aggressive behaviour, whether at home, school or in the community, and for a plethora of other difficulties, such as poor relations with peers and adults, alcohol and drug misuse and general unhappiness. Schooling is especially fraught, 21% have special educational needs and 21% attend special schools. They need help with their academic achievements, attendance and behaviour towards teachers and fellow pupils

The children's parents, in contrast, have relatively few problems other than the stress and unhappiness brought about by the poor relationships between them and their offspring and their children's seeming intractability. They seem relatively well off and integrated into and supported by their local communities. Family discord, breakdown and violence are relatively uncommon.

These difficult adolescents are familiar to child care workers throughout the world. They are the least likely group to accept services and are judged by professionals to display the worst outcomes. The proportion in the sample, however, is only 14%, of all admissions. This may reflect alternatives to care,

policies on the use of special schools or the contribution of youth justice teams. Nevertheless, in terms of resource, these young people remain a major consumer of services.

Group Four

> Children who need protection from risks of harm and help to recover from the effects of serious abuse and neglect

As with Groups One and Two, the children in this group have needs for protection and better parenting but have relatively few other needs compared with their parents. These families have been a continuing concern to children's services. Most (73%) referrals come from health and police and emergencies are common, with the admission of siblings occurring in nearly half of the cases. The age distribution of the children is relatively wide.

The families are socially isolated and parent-child relationships are almost as poor as for Group Three. Recent harm comprises not only neglect (57%) but also sexual (29%) and emotional abuse (43%). Parents show higher figures than the other groups for poor mental health, alcohol abuse, depression and isolation, as well as inappropriate sexual behaviour although levels of family breakdown and domestic violence are relatively low.

The outstanding feature of the children, in contrast, is the high score for many of the protective factors, especially those concerned with education. Most are hard working and much liked.

Permanency plans had been agreed for 48% of them. A quick return home is not perceived as an option in most cases as the parents are seen as unlikely to meet the children's needs in the foreseeable future.

DOCUMENT 5

DESIGNING SERVICES USING THE INFORMATION GATHERED

   i. What are the needs of this group?

  ii. What do we wish to achieve for these children in five areas of their lives (living situation; family and social relationships; social and anti-social behaviour; physical and mental health; education and employment)?

  iii. What services need to be provided to achieve these aims?

  iv. What thresholds need to be put in place to help professionals identify suitable children, to make sure that the right children get the right services and to ensure consistent responses to children and families presenting similar needs?

  v. What support in terms of management and training need to be put in place to make the services work?

  vi. How does the envisaged service compare with what the children and families in the needs group already receive?

EXAMPLES OF CHANGES INDICATED BY THE EXERCISE

Better balance between prevention-early intervention-treatment-social intervention

History of previous involvement (or lack of it) highlights points at which earlier or different interventions might have prevented admissions to care

Effective responses to acute and emergency situations

Half of admissions are emergency

Greater understanding of the co-morbidity of needs

How children causing concern in one area, e.g. for abuse or neglect, have other needs in other areas, e.g. health, education.

Groups that might be diverted from care

Adolescents with presenting challenging behaviour

Families at risk of breakdown

Stronger links between research evidence and service design