Residential Care

The primary care facility utilized by DHS is family foster care. When children are not able to live in a family-like atmosphere one alternative is residential care, staffed 24 hours a day by professionals. There has always been a shortage in the number of beds in residential care and frequently this requires long waits in foster homes which struggle to maintain the placement and need a great deal of support while awaiting an opening at the treatment facility. Residential treatment is seen as an interim living facility with the goal always to change the behavior and treat the underlying emotional issues in order to leave the residential placement and return either back to the previous family or into a family foster placement. The process of determining eligibility and placement in residential care is described in policy I-E.4.3, Residential Services.

Tasks / Assignments:
- Review a case of an older child who is having difficulties in foster care. Use the Residential Services policy (I-E.4.3), Residential Referrals (I-I.4) and the CF 97 Evaluation of Need for Residential Services and Treatment. Discuss with your supervisor what qualities the case has that would either make them eligible or ineligible for residential treatment services based on the policy.
- Ask your supervisor to locate a case that has a completed residential care referral to read. Discuss your responsibility for contact and involvement when a child is placed in residential treatment.

Discoveries:
- What are the funding sources for residential treatment?
- What qualifies a child for one type of payment over another for residential treatment?