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Placing Children in Residential Care: A Scoping Review of Decision-Making and Matching Criteria

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ABSTRACT

Placement decisions in residential care (RC) represent one of the most challenging aspects of child protection services. While often framed as a last-resort solution, RC aims to serve children whose needs are not met through family-based interventions and is used differently across countries. This scoping review explores: (I) the factors influencing social workers' decisions to place children in RC and (II) the criteria considered to determine the most appropriate facility. A systematic search across seven databases yielded 10 relevant studies—seven focused on the first question and three on the second—analysed through thematic analysis and presented using the Decision-Making Ecology framework. Findings highlight the centrality of the child's age and clinical characteristics, with national differences, and confirm the discretionary nature of the decision-making process, shaped by professionals' prior experience, emotions and social support. Matching processes often rely on informal knowledge rather than structured, up-to-date assessments of RC units. Recurrent issues include cost considerations and limited information on residential facilities, while children's involvement is not always considered. The review identifies key CPS practices to guide the placement and matching process and calls for stronger inter-professional collaboration and investment in applied research to support more coherent, child-centred decision-making.

1 | Introduction

Child Protection Services (CPS) play a pivotal role in safeguarding the well-being and development of vulnerable children. CPS professionals have the daily task of making decisions that not only address immediate concerns but aim to create lasting positive change for children and their families. However, the needs and rights of vulnerable children may be multifaceted and conflicting, placing professionals before significant challenges and ethical dilemmas. One of the most critical tensions lies between balancing the child's safety with the preservation of familial ties. This gave rise in the 1990s to two different positions of CPS across systems, either stated or implied: a *child protection-oriented* approach and a *family service-oriented* one

(Gilbert 2012). The first emphasized early removal from parental care and professional-led interventions, with limited family involvement, while the second aimed to strengthen family resources to prevent separation and support relational continuity. However, these approaches should not be seen as mutually exclusive, as both research and national systems increasingly moved toward an integrated child development perspective that prioritizes children's well-being (Bastian et al. 2022; Gilbert et al. 2011).

On this basis, when an out-of-home placement is necessary, family-based options, such as foster or kinship care are considered the best solutions (United Nations General Assembly 2010). However, the actual use of foster and residential care (RC) varies

significantly across countries. Whittaker et al. (2022) identified three levels of RC utilization relative to foster care: low (e.g., US, 10%), medium (e.g., Italy, 52%) and high (e.g., Portugal, 97%). All the Anglo-American systems are in the low group and tend to consider RC as a 'last-resort' (Thoburn 2016), where no staff qualification is required. Thus, placement thresholds are very high in these countries and users often present extreme clinical and social needs, reinforcing the perception of RC as a system failure (James 2022). In Australia, for instance, transgenerational trauma stemming from the 'Stolen Generations' continues to shape CPS decisions and RC population, resulting in an over-representation of Indigenous children with complex needs and long stays (McNamara and Wall 2022). Instead, several European countries make broader use of RC and, in some contexts, it is viewed as a preventive and therapeutic resource, offering educational and relational qualified support to adolescents who may not thrive in family-based settings (Bellonci et al. 2019; Boddy 2013).

Differences in RC use, dependent on cultural values and political visions, are reflected in a variety of methodologies and approaches (James 2022). In this diversified landscape, the UN Guidelines on Alternative Care (2010) emphasize the *principle of appropriateness*, calling for placements that ensure both the most suitable form of out-of-home care (e.g., foster vs. residential), a good match between the child's needs and the specific caregiving setting, and a participatory process for children and their family. Matching, defined as 'the process of selecting a foster family which is the best fit with a child' (Zeijlmans et al. 2017), is therefore equally relevant in the context of RC and central to the placement logic.

CPS placement decisions should therefore be grounded in a holistic, ecological understanding of each case, carefully weighing the various interplaying factors. According to the Decision-Making Ecology (DME) framework (Baumann et al. 2013), (see Figure 1) four interrelated domains may influence CPS choices: (1) child, caregiver and family characteristics (e.g., age, race, socioeconomic status and type of maltreatment); (2) the social worker's experience and attitudes; (3) organizational factors, such as caseloads, turnover and agency support; and (4) external influences, including the availability of community resources and the cultural and political context.
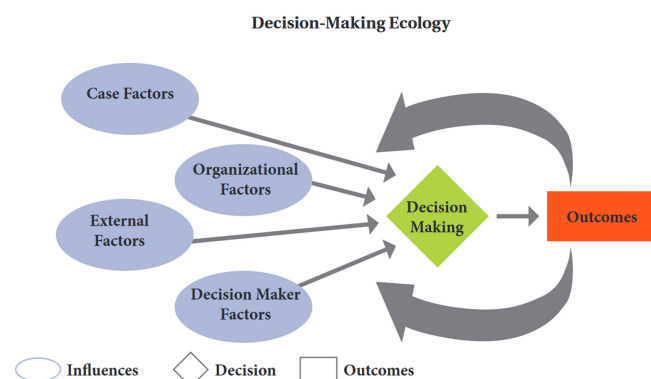
Literature on child removal has shown how decision-making is influenced by a combination of case-specific factors, including child characteristics (e.g., behavioural or medical challenges; Bhatti-Sinclair and Sutcliffe 2012; Lightfoot et al. 2011), parental issues like substance use and mental health problems (Font and Maguire-Jack 2015; Milani et al. 2023) and contextual factors, such as support networks and socioeconomic status (Brisebois et al. 2015; Broadley 2016; Enosh and Bayer-Topilsky 2015). Broader sociopolitical structures and historical patterns also shape social workers decisions. The persistent over-representation of racialized groups in many child protection systems (e.g., Keddel 2023) exemplifies how systemic inequalities rooted in histories of oppression continue to influence social work practice and reproduce cycles of social disadvantage (Dettlaff and Boyd 2020). These external dynamics intersect with internal organizational constraints within CPS, where time pressures and limited reflective space may hinder child-centred decision-making (Bastian et al. 2022). Additionally, social workers' professional experience (Davidson-Arad and Benbenishty 2016; Fluke et al. 2016; Font and Maguire-Jack 2015), their personal beliefs (de Haan et al. 2019) and ideological orientation (Fluke et al. 2016; Hollinshead et al. 2021) also play a critical role.

The subsequent CPS choice of placement type and the process of matching with the most appropriate family or residential unit have received less attention in international literature. Studies on decision-making processes regarding foster care have increased recently (e.g., Holbrook and Strolin-Goltzman 2025), with some literature reviews focusing on the topic of matching (Bergman et al. 2024; Calcaterra and Raineri 2018; Haysom et al. 2020; Zeijlmans et al. 2017). Conversely, decision-making processes on residential placements remain underexplored and no previous literature reviews have been identified addressing these issues.

At a time when the appropriateness of the familial and intimate nature of foster care for all children entering the CPS is being reconsidered (Holmes et al. 2018) and when the availability of foster families is diminishing (Bergman et al. 2024; Zeijlmans et al. 2017), it becomes increasingly critical to deepen our understanding of the processes guiding placement into RC. This paper seeks to fill this gap by synthesizing existing evidence to inform research and practice and to support the development of more coherent, needs-based and child-centred decision-making.

2 | Methodology

A scoping review was identified as the most appropriate method to explore and map the relevant literature. The five-stage methodological framework developed by Arksey and O'Malley (2005) was adopted, incorporating enhancements proposed by Levac et al. (2010). The stages resulting from the fusion of these frameworks are: (i) identifying the research question, (ii) identifying relevant studies, (iii) selecting studies using an iterative approach, (iv) charting the data through a numerical summary and thematic analysis and (v) collating, summarizing and reporting the results and implications for practice and research.

Decision-Making Ecology

FIGURE 1 | Decision-Making Ecology framework model (Baumann et al. 2013).

2.1 | Identifying the Research Questions

The review took as its starting point two related research questions:

Research Question 1. What factors, according to existing literature, influence social workers' decisions to place children in RC once removal from the family has been decided?

Research Question 2. What criteria are used to determine the most appropriate residential unit for each child?

Specifically, the survey focused on the characteristics of the child and their family, social workers' values and experiences and organizational and systemic factors influencing the choice of a residential intervention. This first step is essential to understanding who the children entering these services are and under what assumptions and perspectives of social workers they are referred to RC. These elements lay the groundwork for addressing the second research question concerning the *matching process*, i.e., the process of placing the 'best fit' child with the 'best fit' residential unit.

2.2 | Identifying Relevant Studies

Multiple sources were consulted to be as comprehensive as possible in identifying relevant studies. In addition to scholarly journals, books, dissertations and theses were considered. For developing the search protocol, university research librarians were consulted. Advanced searches were conducted across seven electronic databases: Scopus, Web of Science, Social Science Premium Collection, PsycInfo, CINAHL, Education Source and Psychology and Behavioural Sciences Collection. The databases were selected to reflect the multidisciplinary nature of the child welfare system, encompassing social sciences, psychology and education. Search terms (Table 1) were defined based on the background literature and applied to titles, abstracts and keywords of the publications.

TABLE 1 | Search terms.

Construct	Search term
Decision-making	['decision-making' OR matching] AND
Child protection	['child protection' OR 'looked-after child*' OR 'children in need' OR 'children in care' OR 'child welfare'] AND
Social work	['social work*' OR 'social service*' OR 'casework*'] AND
Residential care	['residential care' OR 'residential facilit*' OR 'out-of-home' OR 'substitutive home*' OR 'substitute care' OR 'substitute home*' OR 'group home*']

Note: The asterisk (*) is used as a truncation symbol to include different word forms during database searches.

The search was conducted between June and November 2024 and included studies published in English and Italian language. All inclusion and exclusion criteria are shown in Table 2.

2.3 | Study Selection

A total of 333 publications were found: 62 from Scopus, 60 from Social Science Premium Collection, 60 from Web of Science, 56 from PsycInfo, 53 from CINAHL, 35 from Education Source and 7 from Psychology and Behavioural Sciences Collection. After screening out duplicates, 147 results were skimmed for relevance by reading each abstract. This process yielded 40 articles, of which the entire text was reviewed. With the support of an experienced researcher, who analysed the texts on which there was uncertainty, nine articles meeting the search criteria were obtained. Their reference lists were consulted in a snowball technique and one more paper was found, for a total of 10 articles included.

A visual representation of the process is depicted in the flow diagram (Figure 2).

2.4 | Charting the Data

Of the 10 studies included, nine were journal articles written in English, and one (Segatto et al. 2021) was an Italian book chapter. Studies were categorized into two main groups: those addressing factors influencing CPS decision to place a child in RC (Question I) and those focusing on the matching process

TABLE 2 | Inclusion and exclusion criteria.

Criteria	Inclusion	Exclusion
Language	English, Italian	Other language
Type of article	Scholarly articles, books, book chapters, dissertations and theses	Conference papers
Data	Any data	None
Study focus	Papers studying CPS decision-making processes in: • Placing children in RC; • Matching children with residential units	Studies focused on: Courts or professionals' decisions on removal or out-of-home care in general; matching for kinship, foster care or adoption; CPS decisions unrelated to placement or matching

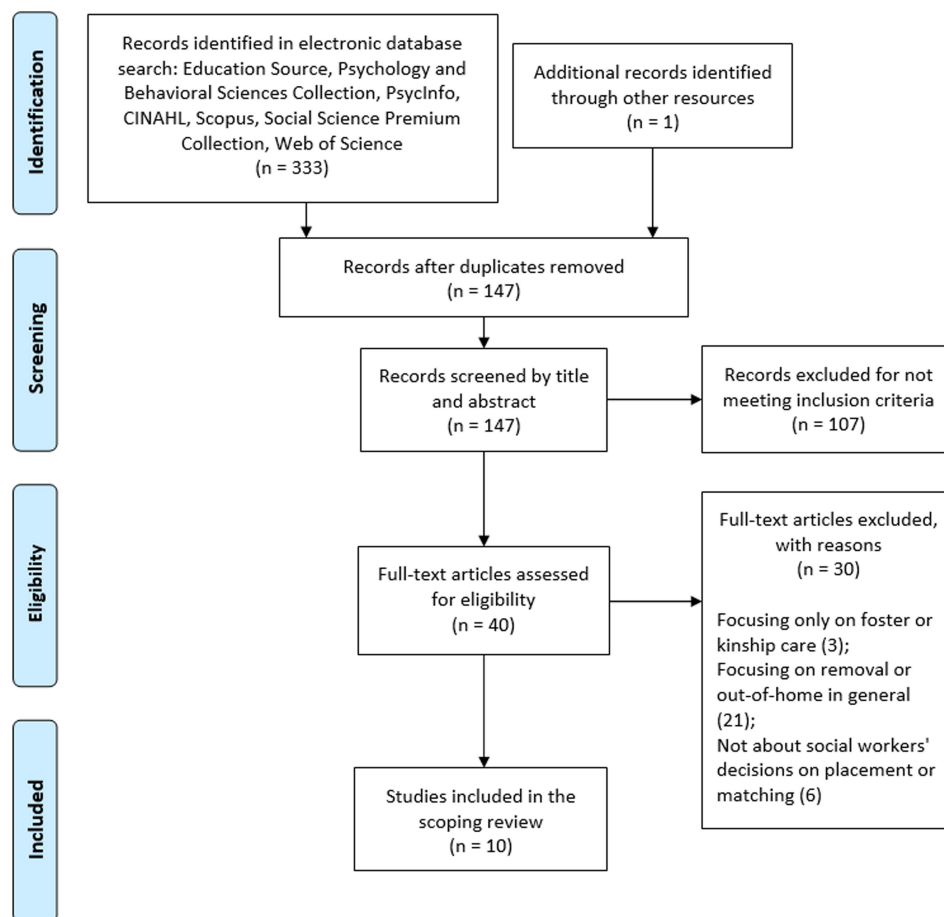Abbreviations: CPS: Child Protection Services, RC: Residential Care.

FIGURE 2 | Flow diagram for the scoping review process adapted from the PRISMA statement by Moher et al. (2009).

(Question II). The first group consisted of seven studies, while the second consisted of only three.

A data charting form was developed and iteratively updated throughout the review process (see Table 3).

Except for one study from 1998 (III), all others were published between 2011 and 2023, with most appearing after 2015, suggesting increasing interest in the topic in the last decade.

Six of the seven studies addressing Question I employed quantitative methodologies, although their specific approaches differed in the choice of sources and tools. Articles I and II drew on administrative data from CPS, while the others gathered data directly from social workers through one or more questionnaires. Three of these studies (V, VI, VII) included vignettes featuring true-to-life case scenarios, recommended for investigating professional judgement in social work (Taylor 2006). Both of the most recent US articles (I, VII) used a portion of the Child and Adolescent Needs and Strengths (CANS) tool, designed to assess multidimensional aspects of youth development and support professional decision-making. The only study (IV) that investigated the weight of young people's opinions instead used qualitative interviews. The three articles addressing Question II employed qualitative or mixed-method approaches. They all made use of interviews (study X conducted them in a quantitative form) and two used focus groups (VIII, X).

Finally, the first group of studies reflects a broader geographic diversity, encompassing contributions from the United States, Southern and Northern Europe, with at least one country representing each of the three levels of RC utilization identified by Whittaker and colleagues (2022): US (low), Italy (medium) and Portugal (high). The interest in the topic of matching, instead, appears to be concentrated in Northern Europe, with a single additional contribution from Australia.

3 | Collating, Summarizing and Reporting the Results

Key issues were identified through thematic analysis (Braun and Clarke 2006), with separate analyses conducted for each set of articles corresponding to Question I and Question II. Each analysis began with an inductive exploration, followed by a deductive approach to systematically organize findings within the DME framework. The identified factors are presented according to their four dimensions, with the addition of 'RC characteristics' to better address Question II.

TABLE 3 | Results summary.

Study ID	Author (data)	Country	Study aim/s	Study design and methods	Key findings
Question I					
I	**Chor et al.** (2023)	United States	To develop and validate a time-to-event, predictive risk model for placement in RC.	Quantitative study based on administrative data provided by a public child welfare agency.	Demographic factors, the presence of disabilities and trauma, and a history of prior spells increased the likelihood of residential placement.
II	**Corradini** (2017)	Italy	To examine elements that affect the possibility for a child to be placed in foster or RC.	Quantitative study utilizing archival data from the CPS of an Italian region, encompassing information on 8438 children placed in foster or RC.	The likelihood of RC placement increased with the child's age and foreign status. Factors, such as family absence and the severity of issues requiring a high level of protection both for the child (i.e., victim of violence) and the community (i.e., criminal problems) influenced the decision.
III	**Courtney** (1998)	United States	To examine factors associated with the preference to place children in treatment foster care or group care as opposed to foster family or kinship care.	Quantitative study based on data from the Level of Care Assessment Pilot Test, conducted by 10 county child welfare agencies. Social workers completed forms assessing case characteristics and their placement type preferences for 348 children.	Older children, the presence of behaviour problems and disabilities and placement history were found to be predictors of CPS placement preferences.
IV	**Fylkesnes et al.** (2018)	Norway	To explore how youth from minority groups narrate their participation before and during placement in out-of-home.	Qualitative interviews with six youths who experienced foster (5) and RC (1) placements.	Participation in decision-making during placement was constructed as precarious, with a negative experience of transfer to RC.
V	**Rodrigues et al.** (2015)	Portugal	To test a psychosocial model of the RC placement process to predict future decisions in parental neglect cases.	Quantitative study. Professionals (195) completed the online *Questionnaire of Residential Care Placement Decision Making*, responding to a vignette about a neglect case. They answered questions on risk assessment, intentions, attitudes, subjective norms, behaviour control and beliefs regarding RC placement. Their experiences, emotions and orientations were explored.	The model showed that emotions, professional experience and social opinion significantly influences CPS decisions. Risk assessment and the value given to protecting children rather than preserving families also affected decisions.
VI	**Segatto et al.** (2021)	Italy	To analyse factors influencing decision-making in child maltreatment cases among social workers.	Quantitative study using three tools (*The Vignette Questionnaire, The Child Welfare Attitudes Questionnaire, Investigation Worker Instrument*) on a sample of 139 Italian social workers.	The social worker's orientation (family support vs. child protection) shaped their attitudes and influenced placement decisions (foster care vs. RC).

(Continues)

TABLE 3 | (Continued)

Study ID	Author (data)	Country	Study aim/s	Study design and methods	Key findings
VII	**Sieracki et al.** (2015)	United States	To examine the influence of non-clinical factors (race, socioeconomic status, treatment type) on caseworkers' placement decisions.	Experimental research on a sample of 229 social workers, who reviewed a vignette about a child in foster care and decided whether s/he should stay in a community-based placement or move to a residential one. Participants also filled out the CANS.	Professionals' decisions were primarily based on clinical factors and problem behaviours rather than demographic factors and child's previous placement. Higher values in CANS items related to problem behaviours and need for treatment, monitoring and supervision were more likely to be linked with residential placement. CPS workers with less experience were more likely to recommend RC.
Question II					
VIII	**Forkby and Höjer** (2011)	Sweden	To analyse the processes involved in CPS investigations that lead to the institutional placement of teenagers and the selection of a residential unit.	Qualitative study using focus groups and interviews. Focus groups included 29 professionals from 10 municipalities: social workers, procurement experts, heads of residential units, council members, social service managers. Individual interviews were conducted with heads of social services.	Residential placements were considered a last resort due to both their high cost and difficulties in assessing quality. Social workers chose facilities based on past experience and 'collective memory', the facility's collaboration with CPS and the quality of relationships with children in care.
IX	**Kor et al.** (2023)	Australia	To identify effective matching strategies for placing young people in RC, avoiding peer victimization concerns.	Qualitative study through semi-structured interviews to 26 RC practitioners and 8 young people of three different residential units.	Three matching strategies were identified: balancing risks and strengths, steering into collective duty of care and involving young people in planning and transition processes.
X	**Pösö and Laakso** (2016)	Finland	To explore matching between children and residential units.	Mixed method approach across a sample of 57 municipalities. Phone interviews with child welfare managers and social workers (49) explored substitute care organization in a quantitative form. Five focus groups with social workers and team leaders (18) examined decision-making processes.	Matching was guided by child and family needs. However, it often involved a compromise influenced by RC availability, cost considerations and family opinions. Uncertainty was particularly tied to facility quality.

Abbreviations: CPS: Child Protection Services. CANS: Child and Adolescent Needs and Strengths. RC Residential care.

TABLE 4 | Factors proved to influence CPS decisions to place a child in RC.

DME		Factors	Description
Case	Child	Age	The likelihood of residential placement increases with the child's age (III). The threshold age was identified at approximately 13 years (I, II)
		Behaviour problems	Youth with external and internal problems (III, IV), antisocial and oppositional behaviours (I, IV, VII) and criminal behaviours (II). Their temporal consistency, higher perception of a constant need for adult monitoring and treatment needs also affected the decision (VII)
		Maltreatment history	Children victims of violence, abuse or neglect (I, II)
		Disability or health problems	Mixed results. Children with disability, cognitive delay or health problems were placed more likely in RC (I, III) or not (II)
		Prior placement history	Youth with previous system involvement (I) or a recent placement in residential facility (III)
		Opinions, wishes	Youth involvement in placement decisions is not guaranteed (IV)
	Family	Abusive	Children living within maltreating or abusive families (II, VII)
		Absent or with a poor caregiver supervision	Children living in absent or leaving families (II) or whose parents' ability to provide supervision is lacking (VII)
		Lack of support network	Children living in families with poor connections and community supports (VII)
Caseworker		Professional experience	Mixed results. On the one hand, caseworkers with less experience (less than 1 year; with one or no prior placement decisions) were more likely to recommend RC (VII). In contrast, practitioners with a higher frequency of residential placement decisions were more likely to recommend it if they associate previous experiences with positive emotions, consequences and social approval (V)
		Emotions	Perceptions of positive emotions associated with the decision (e.g., relief from ensuring the child's protection) (V)
		Child welfare orientation	Mixed results. In Italy, family support-oriented workers showed a slightly more favourable attitude toward RC (VI). In Portugal, child protection-oriented workers were more inclined to recommend RC but their intentions changed when they considered the short-term benefits to the child (safety) and the long-term impact (V)
Organizational		Use of assessment tools	The presence of a recent assessment with CANS (I) and higher values on several CANS variables (VII)
		Workplace support	Colleagues and supervisors' support and approval of the residential placement decision (V)
External		Social support	Approval of the placement decision by the caseworker's family and friends (V)
		Public opinion	Social pressures and media (V)

Abbreviations: CPS: Child Protection Services. CANS: Child and Adolescent Needs and Strengths. DME Decision-Making Ecology framework. RC: Residential care.

3.1 | Factors Influencing Social Workers' Decisions to Place Children in RC

Case and decision-maker factors were the most considered. When possible, they will be discussed in light of the context-specific use and conception of RC. A summary of all the identified factors is proposed in Table 4.

3.1.1 | Case Factors

Among the child's demographic characteristics, age was the only one associated with residential placement, with the likelihood increasing as children grow older, in contrast to foster care (Corradini 2017; Courtney 1998). Chor et al. (2023) reported an average entry age of 12.7, while Corradini (2017) noted a rise in

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placements starting at 14. Gender and ethnicity did not emerge as significant predictors (Courtney 1998; Sieracki et al. 2015), although studies using CPS administrative data (Chor et al. 2023; Corradini 2017) found a higher prevalence of male and foreign youth in RC.

In the United States, the child's prior placement and behavioural issues significantly influenced CPS decisions. Youth with previous system involvement (Chor et al. 2023) or a recent placement in RC (Courtney 1998) faced a higher likelihood to continue in similar settings, whereas prior family-based placements reduced it (Courtney 1998). Both externalizing and internalizing behaviours strongly increased the likelihood of residential placement (Courtney 1998) and key clinical indicators included antisocial and oppositional behaviours (Chor et al. 2023; Sieracki et al. 2015). Aggressive and oppositional behaviours were also cited by one of the youths interviewed by Fylkesnes et al. (2018) as reasons for his move to RC following a failed foster placement.

In the study by Sieracki et al. (2015), higher treatment needs, i.e., the intensity of physical, behavioural or medical care required, were the strongest predictor. Additionally, elevated CANS scores in problem duration and consistency and required adult monitoring correlated with caseworkers' decisions to place children in RC. These findings reflect the US context, where RC use is low and reserved for the most challenging cases, highlighting a high CPS decision threshold and a last-resort logic.

In Italy, Corradini (2017) found that RC placement was more likely for unaccompanied minors, youth with criminal problems and those exposed to violence or abuse. Similarly, US studies also identified absent or abusive families and a history of maltreatment as key risk factors (Chor et al. 2023; Sieracki et al. 2015). Poor caregiver supervision and lack of family's social connections have also been found to increase the likelihood of residential placement (Sieracki et al. 2015).

Both Corradini and Sieracki et al. concluded that a low socioeconomic status was not a risk factor for RC. According to Corradini, economic and housing difficulties were more linked to day care centre access, reinforcing the idea that residential placements are primarily driven by concerns for the child's safety rather than socioeconomic hardship, which can be solved by other forms of support.

Notably, none of the studies considered the child's or family's views and preferences as case factors. The only contribution addressing this gap is provided by Fylkesnes et al. (2018), who highlighted that children's right to be heard is not always guaranteed, as a youth reported being placed in RC without any prior notice.

3.1.2 | Decision-Maker Factors

Professional experience has been measured in terms of both years (in child welfare and in the current position) and frequency of placement decisions (Rodrigues et al. 2015; Sieracki et al. 2015), yielding mixed results. Sieracki et al. found that

social workers with less experience (< 1.25 years; one or no prior placement decisions) were more likely to recommend RC. The Portuguese study, instead, found that a higher number of prior experiences with residential placements makes the difference through the mediation effect of three key mechanisms: (1) emotions experienced after past residential placement decisions (e.g., relief from ensuring the child's protection), (2) consequences observed after prior placements in similar cases and (3) social workers' previous perceptions of how colleagues, family and friends view RC. When these factors reinforced a positive outlook on residential placement, the likelihood of recommending it increased. If Portugal's high use of RC (97%, Whittaker et al. 2022) suggests that most CPS professionals may have direct experience with this type of placement, perhaps it is this widespread familiarity that prompted the study to go beyond experience alone, exploring the emotional and psychosocial dimensions underlying the decision—aspects not addressed by the other studies reviewed.

The decision-makers' ideological orientation also plays a critical role. Segatto et al. (2021) found that both child protection- and family service-oriented professionals held generally unfavourable views of foster and RC. However, an interesting distinction emerged: family support-oriented workers demonstrated a slightly more favourable attitude toward RC. The authors suggested that this preference may stem from the perception that RC allows for greater continuity in children's relationships with their biological families compared to foster care. In the Italian context, in fact, RC staff are highly trained, including in working collaboratively with families.

Conversely, Rodrigues et al. (2015) reported that child protection-oriented workers were more inclined to recommend RC. However, their findings suggested that when these workers weighed both the benefits and drawbacks of RC, their decisions may shift, revealing that the tension was not strictly between child protection and family support perspectives, but rather within the child protection framework itself. Social workers grappled with the dilemma of balancing the immediate safety benefits of RC against its potential long-term consequences. This internal conflict underscores the complexity of CPS decision-making and highlights the need for an approach that integrates both orientations.

3.1.3 | Organizational Factors

Some indication that the geographic location of the organization may influence placement decisions was found by Chor et al. (2023). One of the three regions analysed had a lower probability of residential placement; however, the reasons for this trend have remained unclear and may go beyond geography alone.

Two studies suggest that using an assessment tool (the CANS, in this case) may shape placement decisions. Sieracki et al. (2015) found that higher values in several CANS variables were significantly associated with CPS preference for RC. In addition, the absence of a recent CANS assessment prior to placement correlated with a lower likelihood of RC placement (Chor et al. 2023).

Workplace support and agreement from colleagues and supervisors were identified as key factors in proposing RC placement (Rodrigues et al. 2015).

3.1.4 | External Factors

Perceived approval from the social worker's family and friends may increase their willingness to recommend RC. Conversely, broader social pressures (e.g., the media) and fear of public backlash for a poor decision may dissuade them (Rodrigues et al. 2015).

Finally, child welfare orientation appeared to be more than just an individual perspective, reflecting broader cultural norms. Some studies (Chor et al. 2023; Segatto et al. 2021; Sieracki et al. 2015) framed it as a national characteristic rather than a factor tied solely to decision-makers, although there is no statistical evidence supporting its influence on placement decisions.

3.2 | Matching Criteria

Once CPS workers have decided to place a child in RC, they must choose a facility from those available locally. As Courtney (1998) pointed out, RC 'is not a monolithic entity. Group care facilities vary across a number of dimensions including size, child-to-staff ratios, qualifications of staff, and treatment philosophy. The decision to place a child in one group care facility as opposed to another is certainly worthy of study' (p. 293).

Among the three articles (VIII, IX, X) addressing the issue of child-facility matching, Pösö and Laakso (2016) examined the views of social workers only, while the others added the contributions of policymakers, residential practitioners and youth in care.

A summary of the identified factors is proposed in Table 5.

3.2.1 | Case Factors

A key distinction among the three studies was the role of the child's needs and opinions in the placement process. Unexpectedly, Swedish CPS workers did not mention them (Forkby and Höjer 2011). In Finland, instead, the interviewed social workers reported prioritizing individualized needs, considering age, personality, health and background in line with the child's best interests (Pösö and Laakso 2016). They stated to give primary importance to direct knowledge of the child and family, and to their active involvement in the decision (e.g., arranging pre-placement visits to facilities).

In the Australian study, age, gender, behavioural traits and developmental concerns were cited as primary criteria, assessed in relation to the existing group dynamics within the facility (Kor et al. 2023). Behavioural issues, in particular, were described as being carefully evaluated for their potential impact on other residents. Australian practitioners also emphasized the importance of considering the child's strengths and capacity for change,

suggesting that grouping young people with similar strengths and goals could foster positive peer interactions and smoother transitions.

3.2.2 | Decision-Maker Factors

In the Northern European studies, both personal experience and insights from colleagues were considered key resources in the matching process, often taking precedence over administrative regulations (Pösö and Laakso 2016). The accumulated knowledge of CPS workers, shaped by years of experience, was defined as 'collective memory' (Forkby and Höjer 2011) and allowed practitioners to exercise professional discretion, while drawing on bureaucratic and past placement information; it informed decisions on facility availability, placement procedures, staff behaviour in group homes and child outcomes. This co-assessment could occur both informally—through spontaneous conversations among colleagues—and formally, in team meetings and supervision sessions (Forkby and Höjer 2011). However, relying on personal or collective memory presents risks, particularly in evaluating service quality. Facility reputations, especially negative ones, may persist for years based on isolated incidents, potentially limiting placement opportunities for certain units long after circumstances have changed (Forkby and Höjer 2011).

3.2.3 | Organizational Factors

Financial constraints play a central role. RC was regarded as an expensive alternative to foster or kinship care (Forkby and Höjer 2011; Kor et al. 2023) and was often considered a last resort when no other options were viable (Forkby and Höjer 2011). However, for certain groups, such as adolescents with behavioural challenges, higher-cost placements may be the most appropriate to meet their needs (Pösö and Laakso 2016). Although financial considerations should not drive placement decisions (Forkby and Höjer 2011; Pösö and Laakso 2016), they were a source of concern, particularly due to potential public backlash if the high costs of these programmes were made known. Additionally, financial pressures may create tensions between CPS and RC providers, with some facilities being blamed for prolonging placements, further inflating costs (Forkby and Höjer 2011).

Cost considerations were also closely tied to facility quality. In Finland, CPS must select from facilities designated by municipalities as providing the best quality relative to cost (Pösö and Laakso 2016). However, evaluating quality requires more than financial metrics. Knowing the daily activities of a facility, the methodologies adopted and the outcomes for children could improve the assessment of the effectiveness and appropriateness of the facility for that child. However, these aspects were often poorly documented and unknown (Pösö and Laakso 2016), leading to high variability and heterogeneity in evaluations. Although facilities usually submit presentation documents to CPS, caseworkers may ignore them, not deeming them realistic (Forkby and Höjer 2011). In addition, quality is a fluid and time-dependent concept because the composition of staff, resident groups and emotional climate change rapidly (Forkby and Höjer 2011; Pösö and Laakso 2016).

TABLE 5 | CPS criteria for matching youth with residential units.

DME	Factors	Description and references
Case	Child characteristics	Age, gender, personality, health and background (IX, X)
	Child problems	Developmental concerns and especially behavioural issues must be carefully evaluated in relation to the existing group dynamics within the facility (IX)
	Child strengths	Grouping young people with similar strengths and goals can foster positive peer interactions and smoother transitions (IX)
	Child and family needs, opinions and wishes	Direct knowledge of the child and family, listen to their expectations, opinions and wishes, actively involving them in the decision (X)
	Relational continuity	Preserve family and social ties, selecting facilities close to the youth's original network (IX)
Caseworker	Personal experience	Past residential placement experiences (VIII, X)
	'Collective memory'	The knowledge accumulated by colleagues over years of experience and gathered through formal meetings or spontaneous conversations enables to obtain useful information on facilities and bureaucratic issues (e.g., RC staff behaviour, child outcomes and placement procedures) (VIII, X)
Organization	Facility knowledge	Knowing the daily activities of a RC unit, the methodologies adopted and children's outcomes could improve the matching effectiveness and appropriateness (VIII, X). Reading the presentation documents that facilities submit to CPS could give more information (VIII)
	CPS time constraints	The time pressure and emergency placements may lead CPS workers to prioritize operational efficiency over children's needs and rights (VIII, IX)
	CPS economic constraints	RC services that offer the highest quality at the lowest cost are often prioritized (X). CPS may feel pressured to 'fill the bed' to meet funding requirements (IX) and there is fear of public backlash over the expense that RC services require (VIII)
RC characteristics	Staff skills	Assessing the staff expertise and skills to take advantage of their strengths and minimize operational disruptions (IX)
	Internal relational climate	Ability of staff to foster a positive relational climate for residents and the dynamics in the existing youth group (VIII, IX)
	Collaboration with CPS	Facility's ability to proactively collaborate with the CPS (VIII)
External	Availability of places	Lack of available facilities in the local area can lead to inappropriate and 'compromised matching' (VIII, IX, X)
	National child welfare orientation	National orientation to family support emphasizes community-based interventions over RC, but they are not always the most suitable for the child's needs (X). This tension between professional judgement and systemic expectations was defined as 'ideological uncertainty' (VIII)
	Public opinion	Public dissent, especially regarding RC costs, may steer choice to the least expensive programmes (VIII)

Abbreviations: CPS: Child Protection Services. DME: Decision-Making Ecology framework. RC: Residential Care.

Other organizational limitations included CPS time constraints, which can pressure practitioners to prioritize efficiency over children's needs and their right to participate in decisions (Kor et al. 2023).

3.2.4 | RC Characteristics

To assess the quality of a residential facility, Swedish professionals reported relying on the facility's ability to foster a positive

relational climate for residents and their capacity for proactive collaboration with the CPS (Forkby and Höjer 2011).

Australian practitioners highlighted the importance of assessing the care team's expertise and skills to take advantage of their strengths and minimize operational disruptions.

In addition, a geographic location close to the youth's original support network was considered critical to maintaining family and social ties (Kor et al. 2023). This consideration must be balanced with the need to protect children and remove them from environments that could be harmful to their development and well-being.

3.2.5 | External Factors

The limitation of RC resources also shaped CPS decisions. In these situations, children may end up in facilities that do not align with their specific needs or far away from their family (Kor et al. 2023), leading to inappropriate and 'compromised matching' (Pösö and Laakso 2016).

Northern European studies showed the strong influence of national orientation to family support, although with different effects. Swedish workers reported aligning with their country's emphasis on family support and community-based interventions, which they believed were better suited to support parenting skills, a more difficult aspect to achieve in RC. In contrast, Finnish social workers expressed disagreement with their country's policy of favouring family-based care over RC, arguing that these alternatives are not always best suited to the child's needs. This misalignment between national policy and frontline decision-making was described by Forkby and Höjer as 'ideological uncertainty', a tension between professional judgement and system expectations.

4 | Discussion

The selected studies underscore the complexity of CPS decision-making, where social workers continuously 'navigate' among the competing needs of various stakeholders, organisational limitations, normative frameworks and uncertainty surrounding decision outcomes.

In response to Question I, the analysis shed light on the profiles of children most likely to be placed in RC, with differences related to the national context. Rather than demographic characteristics—of which only age appeared influential—social workers seem to prioritize clinical factors. US articles emphasized the role of behavioural problems and the need for intensive supervision not available at home, while the Italian study by Corradini (2017) highlighted the use of RC due to the need for protection from absent or abusive families.

Notably, vignette-based studies revealed that professionals reached different placement decisions when evaluating the same case, reinforcing the idea of the highly discretionary nature of CPS decision-making. As Sieracki et al. (2015) argued, it is not the child's characteristics per se that drive decisions, but how these are *perceived* by individual social workers. These perceptions are in turn shaped by the decision-maker's background of experiences and emotional responses to previous residential placements. When those past experiences were positive, they tended to support similar decisions in future cases (Rodrigues et al. 2015), potentially triggering a virtuous cycle in which RC is recognized as a valuable intervention.

Despite being recognized as a fundamental right, children's participation in placement decisions still does not appear to be guaranteed or even considered. Among the studies in the first group, only Fylkesnes et al. (2018) addressed this issue, describing an instance of non-participation in RC placement. While this may be linked—though not justified—to the urgency or severity of the case, it aligns with broader findings indicating that children in RC are often less involved in their own case planning than those in foster care (Lausten and Kloppenborg 2022) and that many are excluded from major life decisions (McPherson et al. 2021). In the matching process, the views of children and their families gained more importance. However, in Forkby and Höjer's (2011) study, CPS actors made no reference to children's opinions or wishes, possibly reflecting the limited attention given to this issue at the time or the enduring challenges in translating this principle into practice (Toros 2021). Supporting this, Kor et al. (2023) noted that youth involvement is often constrained by time pressure and limited placement options.

Moreover, focusing solely on the child's problems is insufficient for a good match. Australian practitioners have emphasized the importance of adopting a strength-based approach, considering both the child's individual capabilities and the resources available within their network.

Yet, serious doubts arise: How can appropriate matching be achieved when CPS workers lack detailed knowledge about local residential facilities? When demand exceeds availability or when time pressure and at-risk situations force rushed emergency placements?

Organizational limitations—such as the absence of quality evaluation tools, economic and time constraints—emerged as key barriers, often leading to 'compromised matches' (Pösö and Laakso 2016). When placements are poorly aligned with a child's needs, there is a heightened risk of instability, prolonged care episodes and multiple re-placements. Supporting this, a prior residential placement was found to increase the likelihood of a new one (Chor et al. 2023). This is not only costly and time-consuming for CPS, but also has a detrimental impact on the child's well-being, undermining the stability of their care trajectories and, consequently, their chances for resilience (Stein 2005).

Forkby and Höjer (2011) found that the primary source of information about placement options and the perceived quality of facilities was the CPS 'collective memory'. While this informal knowledge-sharing can facilitate decision-making, it also carries risks: assessments may be driven by outdated reputations or anecdotal impressions, rather than by systematic, evidence-based evaluations. At the same time, the complexity of these decisions underscores the need for co-assessment practices and sustained professional support, both within and beyond

the workplace. Recognition from supervisors, as well as social support from peers, friends and family, plays a crucial role in enabling workers to choose RC options resisting the public stigma that almost everywhere affects these types of services. Many practitioners operate under significant emotional strain, often reporting feeling 'damned if you do, damned if you don't' and caught in a state of 'ideological uncertainty' (Forkby and Höjer 2011). The conflicting findings on the role of child welfare orientation across the reviewed studies further emphasize the need for a more integrated and holistic approach—one that centres children's well-being, while balancing protection, support and relational continuity throughout the process.

4.1 | Recommendations for Practice

Based on the results of this review, the following actions are recommended to enhance the coherence and effectiveness of social workers' decision-making in placing children in RC:

- *Consider the child's and family's needs and views*, making sure that they feel heard and acknowledged throughout the process;

- *Employ structured assessment tools* to temper individual subjectivity;

- *Embed reflective practice*, e.g., through supervision and peer case consultations, to help professionals recognize how past experiences and emotions shape current decisions;

- *Maintain regular contact with residential facilities*, scheduling visits and phone contacts to improve knowledge about each programme's model, target population and staff competencies;

- *Use shared checklists to support appropriate matching*, considering: the child's and family's needs, strengths and goals; the RC unit's ability and expertise to meet those needs; the current group composition and dynamics within the facility; the collaboration and communication quality of the facility; and the facility's strategies for engaging and strengthening the child's family and social network, as well as its geographic proximity to that network when appropriate.

4.2 | Recommendations for Future Research

Participatory field studies and evaluative research are particularly needed both within CPS, to further investigate the admission criteria and the involvement of children and families, and within RC, to monitor interventions and outcomes. Close collaboration with RC professionals, along with targeted staff training in collecting and interpreting their own data, can help build internal evaluation capacity, enhance professional self-efficacy and support more transparent communication with CPS, ultimately strengthening evidence-based decision-making.

5 | Limits

While this review provides insight into CPS decision-making processes, stated practices (e.g., through interviews or self-report

methods) may differ from actual behaviours in real-life settings. Moreover, inconsistent use of RC terminology across literature and systems may have affected study selection. Only 10 studies met the inclusion criteria, despite searching across seven databases and reference lists of selected papers, providing a partial view of the phenomenon. Additionally, the review was conducted by a single researcher, even though the search strategy was developed with librarians' support and selection doubts were discussed with a senior researcher.

6 | Conclusions

The complexity of CPS work calls for a shared responsibility across the system to ensure accountability and transparency in placement decisions (Kor et al. 2023). Meaningful change toward a need- and child-centred decision-making requires coordinated efforts among all actors involved—children, families, CPS workers, RC providers and other stakeholders—and a reflective, dialogic collaboration grounded in mutual understanding of each party's role, responsibilities and capabilities (Folgheraiter 2007).

Conflicts of Interest

The author declares no conflicts of interest.

Data Availability Statement

Data sharing is not applicable to this article as no new data were created or analysed in this study.

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Supporting Information

Additional supporting information can be found online in the Supporting Information section. **Data S1:** Search string and results for each database.