POLICY STANDARDS FRAMEWORK IN RELATION TO RESIDENTIAL AND COMMUNITY-BASED CARE

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STANDARDS

These standards came from a global perspective of the issues that any residential home and community-based programmes need to address…

The indicators attached to each standard are on the whole quite generalist and will need adapting further to each location and or situation even down to township and village levels.

There are 38 standards with corresponding indicators and they are a starting framework.

STANDARDS

We have grouped the 38 standards to fit under 5 main headings;

- PROFESSIONAL PRACTICE

- PERSONAL CARE

- CAREGIVERS

- RESOURCES

- ADMINISTRATION

All standards should, despite the groupings be considered as part of the whole – they are mutually supportive.

FORMAT OF STANDARDS

Each standard is presented using the same format, which comprises of the following:

- The **area of child care concern** for which a standard(s) is required;

- The **standard** or standards that are expected to be kept within that area;

- The **mandate** which supports the standard(s). In this document it is taken from International Standards incl CRC but country appropriate laws and agreements could also be applied here.

- The **purpose** in wanting to have a standard in this area;

- The **indicators** show what the result is/should be from instituting the standard;

- The **contra indicators** are those things that are likely to happen if the standards are not instituted.

FORMAT OF STANDARDS

- The **practice implications** set out some of the main requirements and consequences that will result from both trying to meet and meeting the standard;

- The **activities** are some of the main specific interventions that will need to take place to achieve the standard;

- The **verifications** consist of the information and facts qualitative and quantitative that show the extent the standard is being achieved, ie that it has been met, is better than before, has not changed or is worsening.

PRINCIPLES OF STANDARDS

1. **The best interests of the child** is paramount as set out in the CRC and other relevant international instruments. This should be non-discriminatory and gender sensitive.

2. **Early family support** (eg financial, provision of basic services especially education and psycho-social support) **to prevent or reduce the especially difficult circumstances children face** is the first priority intervention and needs to be effective, sustained and monitored. Where that cannot provide the minimum care and protection a child needs then community-based care should be sought. **Residential care should be a last resort and temporary**, ie for the shortest possible time.

3. All care and protection assistance to CEDC/CNSP and their carers needs to have a multi-sectoral approach involving all necessary government departments, NGOs, CBOs, religious bodies, other children, etc, who may be able to offer assistance in family support, basic services and in reducing the difficult circumstances a child is in. The different forms of assistance need to be coordinated and part of a continuum of care until the child and his/her parents say they no longer need that support.

PRINCIPLES OF STANDARDS

4. Listen and learn from the child and his/her peer group's views.

5. Working and empowering parents /guardians with whom CEDC are living is as important as working with the CEDC/CNSP themselves. Psycho-social support is an important element for parents and children in addressing their unresolved feelings concerning relationship problems, loss, protection, discrimination, abuse, etc.

6. Any form of out-of-home care (apart from adoption after 6 months) requires regular support from both community members and in formal care situations also from social work officials to ensure carers are looking after the child appropriately.

7. Children as a peer group can be an important support to CEDC/CNSP whether in residential care, in school, out-of-home care or in birth families.

8. Community-based adult support to CEDC/CNSP needs to be developed through training and locally appropriate mechanisms and structures.

PRINCIPLES OF STANDARDS

9. Government must believe in community-based care as the best approach to children's care and protection where family support fails and put the necessary resources into assisting CEDC, eg social assistance, basic services, personnel, appointment and training of social workers and community workers, community facilities, etc.

10. Monitoring, data collection and analysis of care provision is required using some form of independent inspectorate.

11. Supportive and enabling Laws, standards, policies, procedures and guidelines exist or are improved after consultation on their content with the key stakeholders.

12. All forms of care should prepare a young person for living an independent and productive life in the community. An essential part in that is the acquiring of social and life skills.

PROFESSIONAL PRACTICE

1.1 - A child care policy with written aims and objectives setting out good practice in assisting CEDC

1.2 - Family support is the priority approach to support CEDC

1.3 - All child care programmes have a child protection policy, known to all their staff and the children in their care

1.4 - Child care placements and programmes have a clear referral and admission process

1.4.1 - Residential care placements have a clear referral & admission process

1.5 - All children for out-of-home care, especially those on formal placements, have a care plan

1.6 - All children's placements are reviewed regularly

PROFESSIONAL PRACTICE

1.7 - The priority role of each residential home and its staff is the personal care of children and their best interests

1.8 - Each child's care plan sets out the rehabilitation and reintegration preparation to be achieved while in temporary care, and the resettlement support they will receive on return to their community

1.9 - Formal foster care policy and good practice

1.10 - National & inter-country adoption

1.11 - Independent living accommodation and small group homes

1.12 - Kinship care and informal fostering

PERSONAL CARE

2.1 - Children in formal or informal care require a holistic approach to their needs

2.2 - Children shall be treated with dignity and respect at all times

2.3 - Positive relationships between carers and children are encouraged

2.4 - Children are supported to make informed choices

2.5 - Children's sense of identity is maintained

2.6 - Children are supported to voice their opinions and views

2.7 - Children's links with their parents/family/guardians promoted by visits, holiday stays, letters, phone-calls, etc

2.8 - Children's access to education supported, wherever possible in a community context

CAREGIVERS

3.1 - Recruitment and selection procedures ensure quality child care and protection

3.2 - Staff and carers have regular supervision and support

3.3 - Carer & staff deployment ensures quality child care and protection

3.4 - Professional development and training are available for staff and carers

RESOURCES

4.1 - Services are accessible to the target group and the community, and appropriate for their purpose

4.2 - The accommodation for children promotes their health and development

ADMINISTRATION

5.1 - Appropriate records and data are maintained

5.2 - Children's confidential details and records are respected and maintained

5.3 - Owners and managers of child care programmes are accountable

5.4 - Regular external inspections by competent person/body to check that for formal care placements appropriate management, facilities and standards of care are in place

UNICEF

EMERGENCIES

Although most of the standards are relevant to the care of children in disaster and emergency situations there are other factors that have to be taken into account in those situations which standards do not address.

Sphere Handbook edited by Isobell McOnnan and published by Oxfam (2004).

http://www.sphereproject.org/handbook_indes.htm

David Tolfree's – "Whose Children"

THANK YOU!