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JOCKEY CLUB DESIGN INSTITUTE FOR SOCIAL INNOVATION

**Season 14: Small Group Homes
Landscape Study**



Disclaimer:

JCDISI initiated the Small Group Homes (SGH) Landscape Study (from August 2021 to December 2021) with the objective of allowing JCDISI to get acquainted with the topic and identify opportunities for social innovation. As part of knowledge sharing, JCDISI is sharing the study to help those interested in this SGH and Residential Child Care Services to know more about the background of Season 14. This is not a research-oriented study and the information set out in the study is based on desktop research and discussion with individuals involved in SGH service. The information may not be a full representation of the experience of all SGH operations and individuals shall not be held accountable for the views expressed.



S14 Project Objectives

1. Develop a children-centric approach to focus on resident's experience and satisfaction.


i.e. Review and reshape existing service design with a children / adolescent's perspective and establish a positive living experience, regardless of the resident's duration of stay in SGH, through both hardware and software interventions.

2. Increase the level of children resiliency into adulthood, building relationships, personal growth, and the real world, be “future ready” upon discharge.

i.e. Prepare residents for the current and upcoming challenges upon and after discharge, including the reunion with parents and personal development in adapting to adult life.

3. Leverage community / society resources complementary to the existing SGH services

i.e. Investigate and revamp the prevailing process with collaborative support from the wider social service sector and society to enhance SGH experience and services catering to children's and frontline workers' needs and case situation.



Timeline: JCDISI

Scoping & Landscape Study

November --
December 2021

- Understanding bottlenecks / issues in the SGH system
- **Set directions** for collaboration eg. engagement, co-creation and action projects

Engagement Activities Persona Development

January -- March 2022

- Focus group discussion with **house parents and social workers** to understand pain points and issues themselves and the children face to inform co-creation focus

Symposium

April 2022

- Direction: Innovation experiences and ideas sharing, community resources for SGH

Co-Creation Workshops

June 2022

- Co-create hardware and software solutions that meet the three objectives and adds value to the SGH and RCCS

Action Project(s)

July 2022+

- Developing prototype (EIP + software program for capacity releasing)
- Testing out implementable interventions with **SGH service providers and stakeholders**

RCCS History

Post War Product

To take care of children who lost their parents

From Institution to Home-like

- Bioparents unable to provide adequate care
- Temporary in nature
- Subvented and operated by NGOs

Catering for children with different needs

- Small Group Home
- Children's Home
- Residential Child Care Centres and Children's Reception Centre
- Boys and Girls Home
- Boys and Girls Hostel

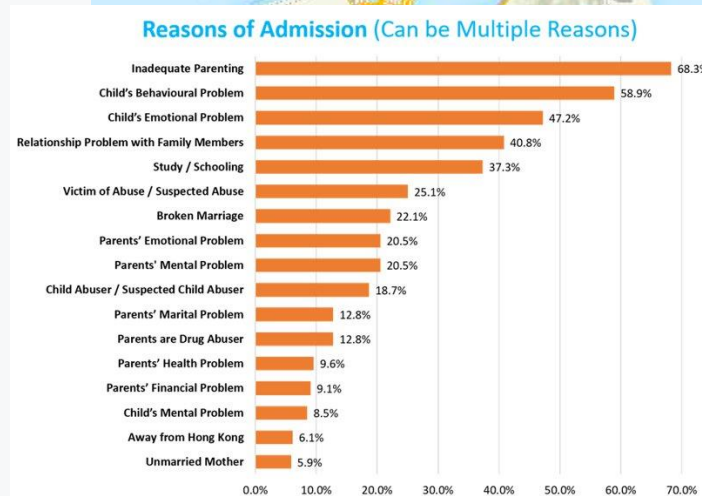
RCCS Operators

Organization	Small Group Home	Foster Care	Boys/Girls' Home	Boys/Girls' Hostel	Children Home	Residential Nursery and Creche
S.K.H. St. Christopher's Home	●	●				
The Hong Kong Student Aid Society Limited	●	●	●		●	
Hong Kong Family Welfare Society		●				
Hong Kong Christian Service	●	●				
Hong Kong Juvenile Care Centre		●	●			
Boys' and Girl's Club Association	●					
Yan Chai Hospital Social Services Department	●	●				
Precious Blood Children's Village					●	
Hong Kong Children & Youth Services	●	●				
Evangel Children's Home					●	
Caritas - Hong Kong			●	●		
Society of Boys' Centres			●			
Po Leung Kuk	●	●			●	●
Project Care	●					
Sisters of the Good Shepherd			●	●		
Hong Kong Society For the Protection of Children						●
Mother's Choice		●				●
International Social Service Hong Kong Branch	●	●				
Hong Kong Lutheran Social Service		●				
Tung Wah Group of Hospital	●	●	●			
The Salvation Army	●			●	●	

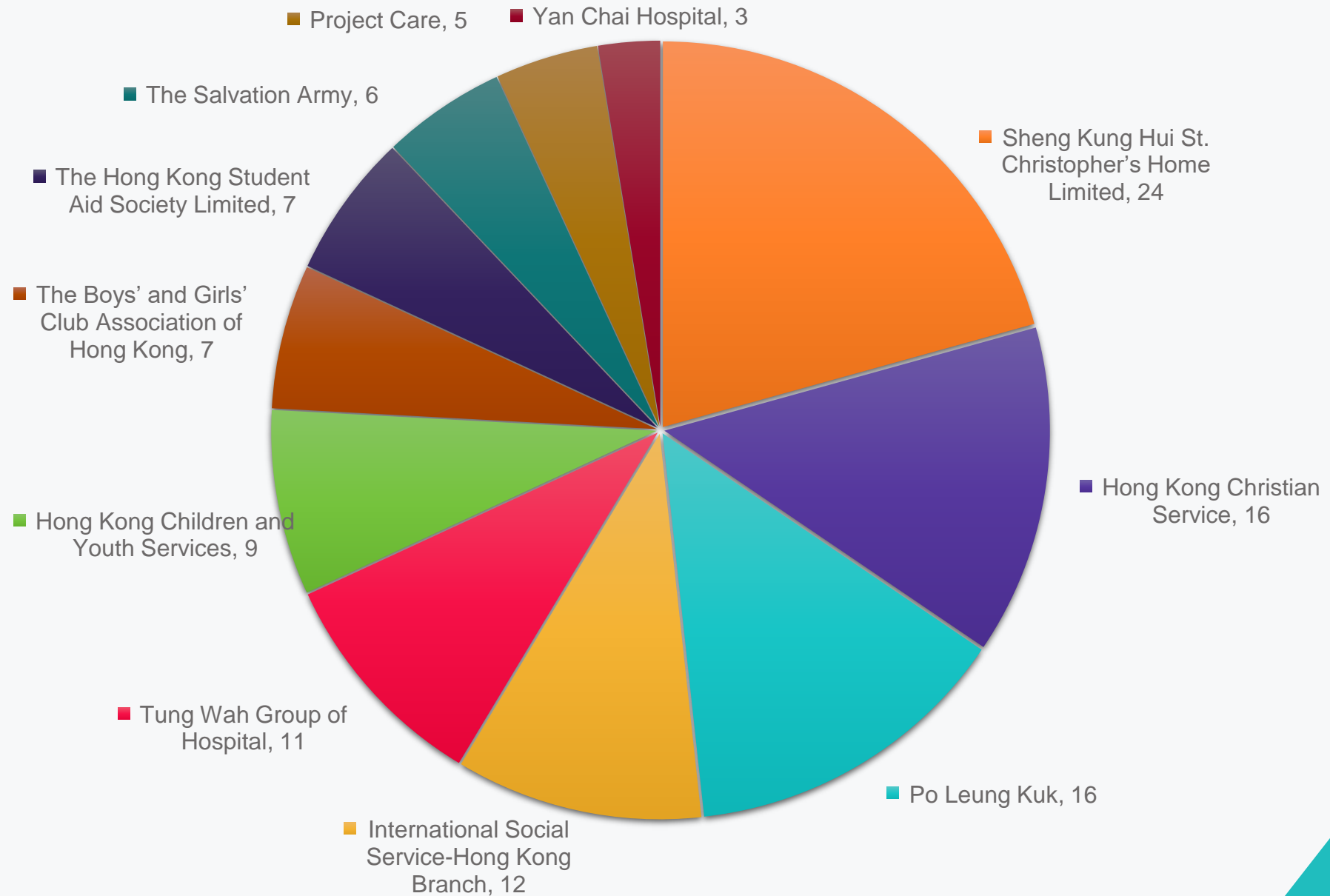
SGHs Brief Overview

兒童之家

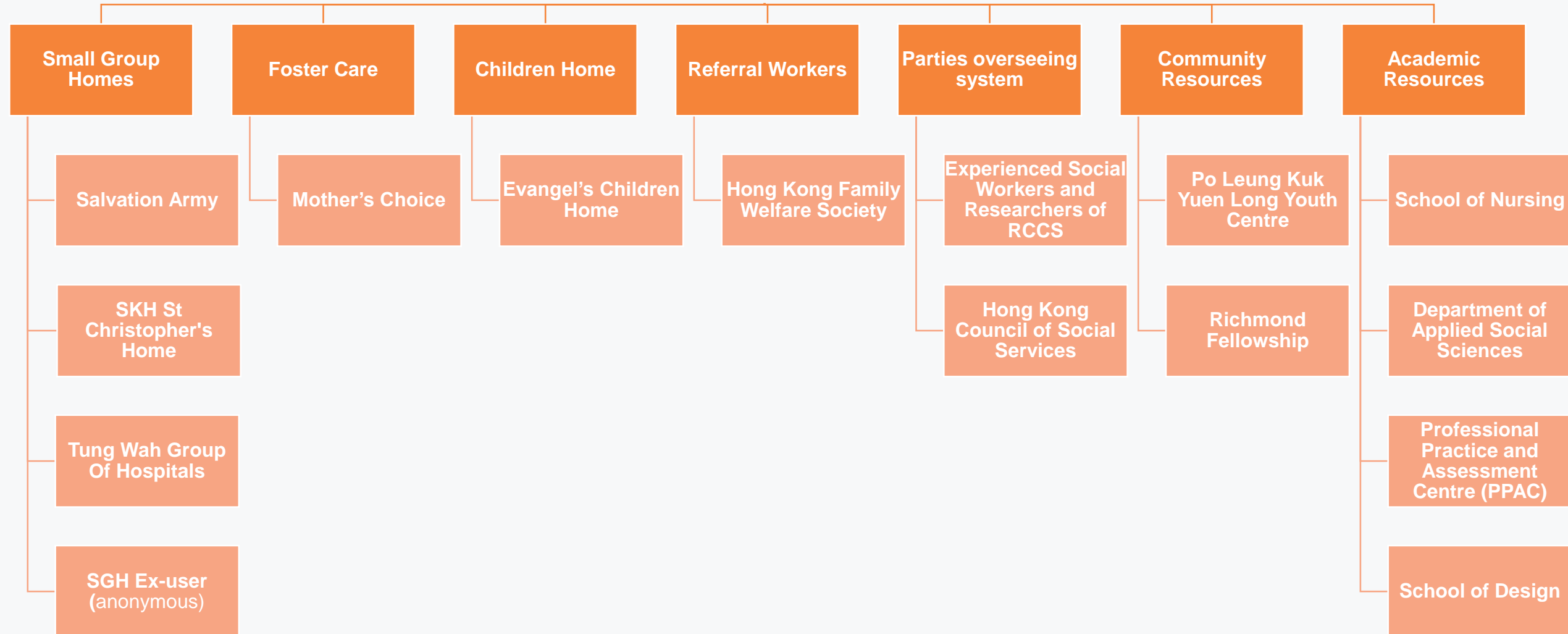
- To create a safe and stable family home-like environment
- Children aged 4 - 18
- 8 children (with mild SEN, behavioral and emotional problems) in 1 SGH
- Cared for by a pair of house parents
- 116 in total
- 40 - 60% of residents with SEN in 2021
- Admission process, referral process, and the spatial requirements have been largely unchanged since the 80s



Number of Small Group Homes – Operators



Parties We Have Had Discussions With (Oct 2021 – Jan 2022)



RCCCS Process



Key Stakeholders

- Children
- Social Workers (Family Integrated Services)
- Social Welfare Department
- Service Operator
- Social Workers (Small Group Homes)
- House Parents
- Assistant Parent
- Clinical Psychologists
- Therapists
- Bioparents

Before Admission

○ Form (3)

- **A referral criteria that works in the best interest of children**
- In the **case of an emergency**, there are two options for the child:
 - A) find alternative relative / home carer / parent to take in child to safe environment
 - B) find an open immediate home placement for temporary situation
- Will also conduct a **Parent Capacity Assessment** to determine most suitable residential service and length of stay
 - Assesses parent's capability of caring for the child and what issues they need to solve first before the child is able to return under their care
- Upon completion, a separate internal admission form is required by each SGH service provider
- The case still requires approximately 3 - 6 months before the case can move forward
ie. Find a suitable placement for the child

Before Admission

- **Form (3)**
 - **Assessment of family issues and background, environment, conditions**
 - **A – I:** consists of quick checkboxes / **H – J:** involves detailed answers
 - Usually completed by **referral (family) case workers**
 - Case profile to be passed on to service providers and other case / support workers
- **Parental / Guardian Consent**
 - is required to allow child to enter the system / open case file
 - If parent / guardian does not consent, child is not able to leave situation
- **Case Workers Relocate Children to RCCS as a Last Resort**
 - Family-based (non-institutionalised) better for children's development
 - Parents would not want to send their children to SGHs unless there is no other choice

Living in SGH

○ Spatial Setting

- Public Rental Housing (unit may be L or Y shape)
- 3 units as 1 household (8 children + 2 house parents + 2 assistant parents (single, 44 hr/week))
- 3 households within one building (1 on each floor)
- 4 children sharing one room, i.e., 2 bunk beds
 - Insufficient personal and storage space
- An extra room for meeting use / sensory room / trauma-induced care and design
- Female and male children sharing same bathroom
- Sharing the same communal space when carrying out different activities
- No quiet space for calming down
- Insufficient resources at home for all children to meet online schooling needs under COVID-19

Length of Stay

- Majority stay for 2 – 3 years

Living in SGH

○ House Rules

- **Highly subjective to parenting style**
- **Routine** – good for children with SEN and mild behavioral problems
 - Restrictive use of the cell phone e.g. 1 – 2 hours every day
 - Short Prayer before meals
 - Stay in communal space to play, study and eat
 - Only allowed to go back to bedrooms for 1-2 hours before sleeping
 - Return home immediately after school
 - Any activities outside school require consent from SW, house parents and bioparents
 - Leave will be granted for children with good performance
 - Housework responsibility in accordance with their ages to build sense of belonging
e.g. folding clothes, etc.

Living in SGH

○ Entertainment and Activities

- On a daily basis
 - Young children can go to playground / park
 - Mainly watch TV
 - One computer shared between 8 children
- Arrange hobby classes for children (*eg. cooking class, planting*)
- Family outing (*e.g. watching a movie together*)
- Organizing festive events (*e.g. Christmas Party*)
- Joint SGH activities for adolescent residents (*e.g. paddling, rock climbing*)

○ On Leave with Bioparents

- Poor parenting
- **Regression of performance**

Living in SGH

○ Relationship Among Residents

- Older children's needs are always compromised
 - expected to help take care of younger children
- All **craving for undivided love and care**, easily jealous of one another
 - Regression of behavior to seek attention from house parents

○ Building Relationships between Children and Frontline Workers

- Particularly **difficult after abandonment of bio family**
 - Many children **arrive into SGH not knowing what "home", "safety" and "trust" are**
- Sensitive **trauma informed care**
- **Empathy education** to establish common ground
- SEN children require more love and care as they are more self-centered
 - Long-term effort, requires a lot of encouragement and recognition

Living in SGH

○ **Case Review Meeting**

- **To discuss permanency plan for children**
 - Involves referral social workers, SGH social workers, house parents, bioparents and children
- Every 6 months (can be shortened subject to the condition)
- Setting goals for both bioparents and children
- **Children are involved within much of the decision-making process**
 - Social workers work to ensure their individual needs and wishes are being met

○ **Supported by a Team of Professionals**

- Social Workers, Clinical Psychologist, School Teachers

Upon Discharge

○ Independent living skills training

- Varies by service provider
- Series of soft programming scattered throughout their stay (ex. small daily chores)
- Life coaching throughout their duration of stay
 - career coaching is also fostered 6 months before discharge

○ Contact with SGH / Case Worker

- Case is considered "**closed**" **once child reaches 18 yo.**
 - some service providers allow for zero contact once case closes upon 18 yo.
- May be lost to what resources and services to rely on

○ Living Situation

- Young adult hostel or on queue for public housing if lucky
- Poor relationship with bio parents/family
- Does not feel ready – **separation / preparation anxiety**

Issues

Children living in SGH

- Lack of entertainment for adolescent residents
- Less socially connected compared to other children at school
- Children come with a lot of trauma and emotional baggage
 - **abandonment and attachment issues**
- Many children **do not know how to express and manage their emotions** (angered easily)
 - house parents also face difficulties in dealing with emotional children
- Takes some time for new admitted children to adapt
 - Many may lash out, ruin / deface / move furniture
 - **Experience hyper-arousal**

House Parents and Frontline Workers

- 24 hours intensive care
- Emotionally attached to children and lead to **mental burnout, high turnover rate**
- Increasing **difficulty hiring new house parents** after retirement of experienced parents

Issues

Upon Discharge

- 18 – 21 year olds are **not ready for the adult world**
 - Most **receive no support from bio family**
 - Difficulty in engaging successful reunion with bio family—very rare
 - End up living in young adult hostels / housing / sub-divided units
 - Need for aftercare / support community
- No systematic way to train for life skills
 - no planning milestones are required or set during the children's stay in SGH / RCCS
- Lack of financial acumen and management (both bioparents and children)
- **Many bioparents are ill prepared** to receive children upon discharge
 - does not know how to parent or have the skills / condition to provide care

Spatial Constraints

- **Lack of space** for physical activity, personalized areas, emotional needs, private space
 - while allowing for monitoring of status / well-being
- **Need for transitional temporary housing** during times of renovation
 - without causing too much disturbance for the children's day to day life
- Furniture and facilities cannot cater to the needs of children of different ages

Issues

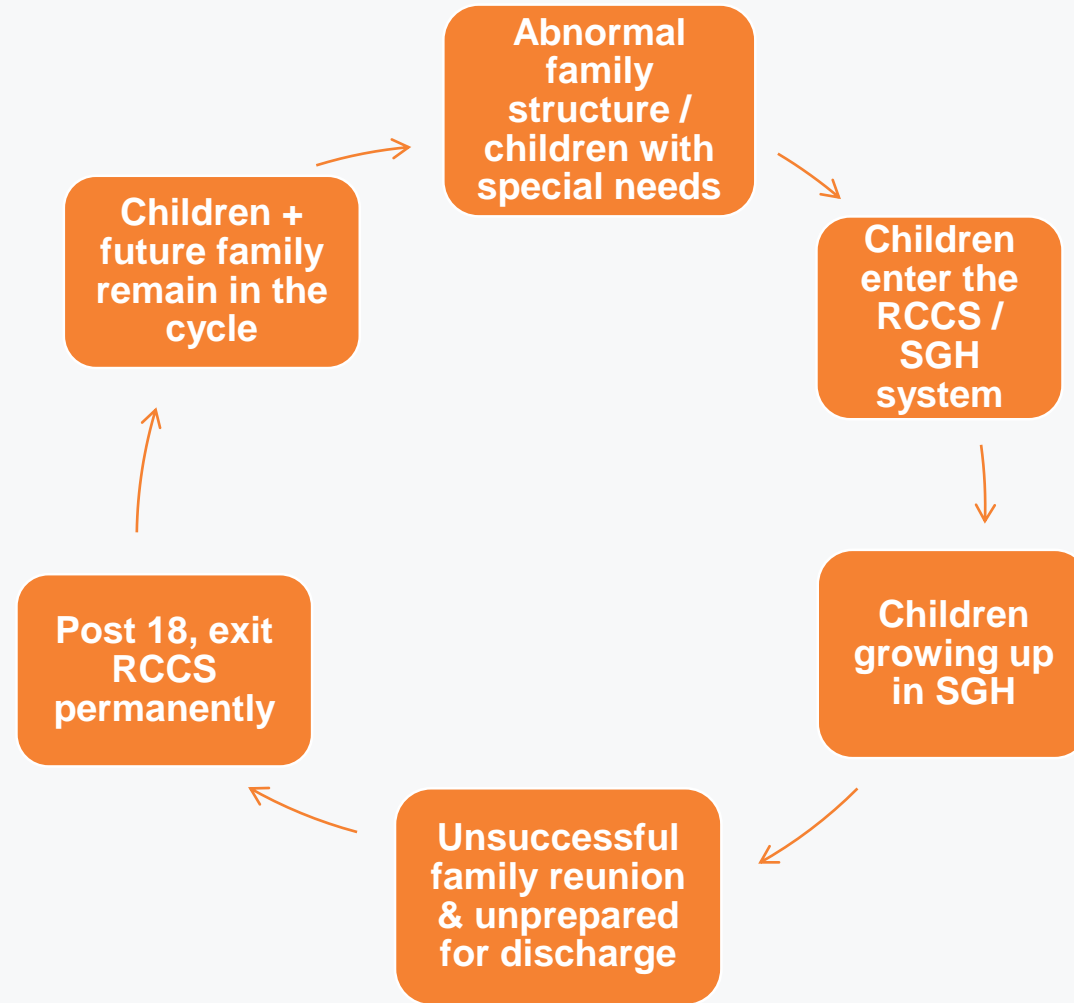
Family Reunion

- **Poor Relationship with Bioparents**
 - Conflict between house parents and bio parents
 - Not wanting to go home
 - better living standards and environment in SGH / RCCS
- Few return back to the family
 - Require efforts from both children and bioparents, SGH SW and referral SW
 - Many bioparents are ill prepared

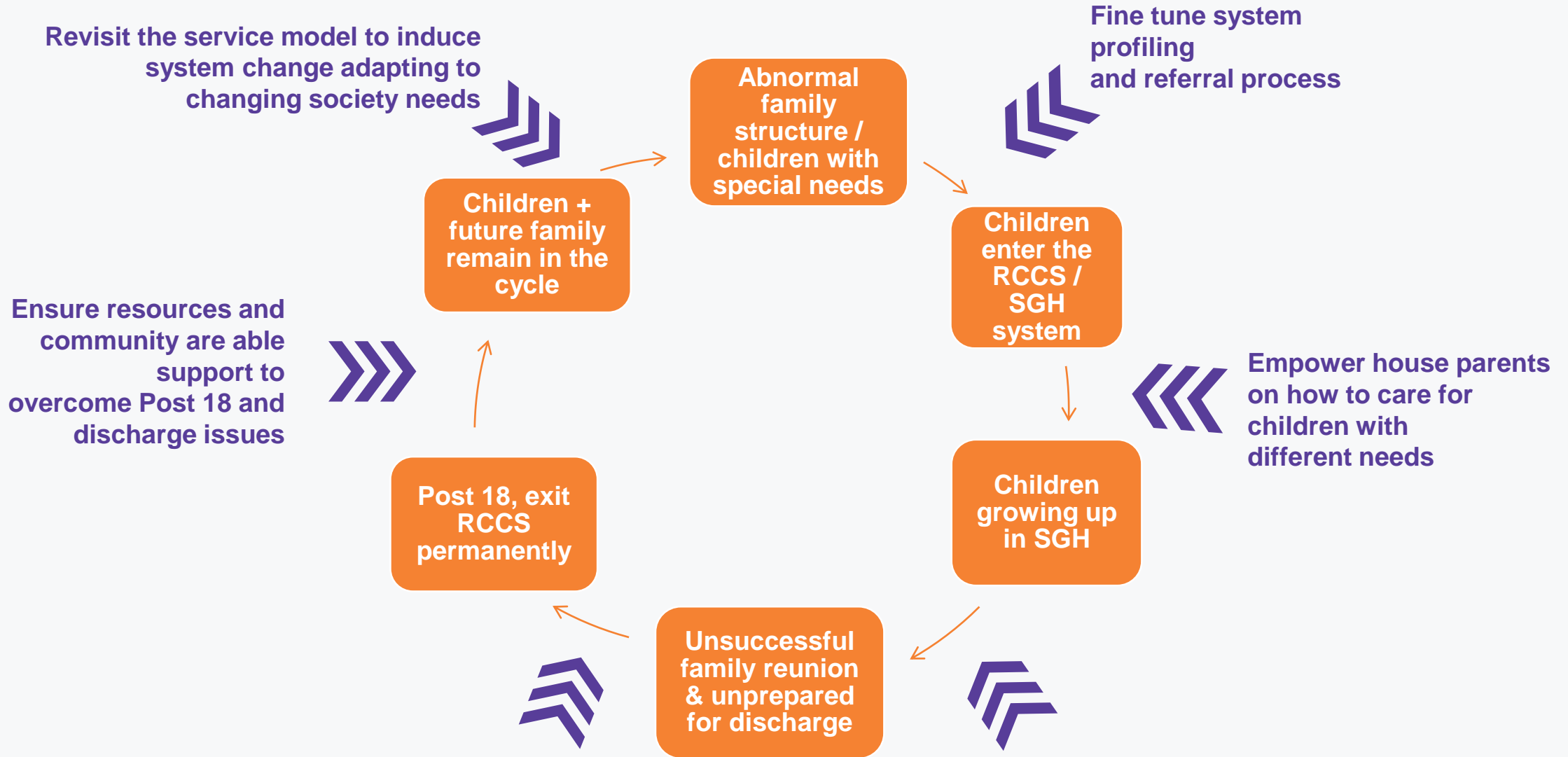
Services Operators

- **Child protection and trauma informed care** as the essence of SGH
- Differing objectives and views of service providers
- Post-18 service is beyond the RCCS scope
 - Many operators are concerned about the lack of support for the aged-out residents
- **No standardisation of on-job training** for frontline workers
 - Subject to the provision of services operators

The Current Cycle



JCDISI suggested interventions and system change



- Conceive ways to manage and cope with emotional baggage
- Assist building other soft skills

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