

Statement of Purpose



Acorn Education And Care

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1. QUALITY AND PURPOSE OF CARE

Acorn Cottage is a therapeutic young people's home for children under the age of 18. We offer a 52 week placement with inclusive education. The home accommodates up to a maximum of 6 children.

Acorn Cottage care for children with social, emotional, mental health need which is often caused by some sort of trauma in their early years, such as sexual, physical or emotional abuse or neglect. Many of them present with a variety of behavioural problems, such as Conduct and Attachment Disorders, Attention Deficit Hyperactivity Disorder, sexualised behaviour, and special needs such as moderate learning difficulties to include ASD.

Admission Criteria

Placements cannot be considered for a young person who presents as an arsonist, serious self-harm that requires attention from medical professionals, hard drug users, young people who require continuous psychiatric supervision and have a serious Mental Health disorder young people who pose a serious physical threat to themselves or others, and those who have a physical or profound learning disability.

Our aim is to help the young people in our care to overcome the difficulties they have experienced in their young lives, to support any behavioural problems they may present with, to prepare them for their eventual return to their family of origin where this is viable, or integration into long-term foster care and help them achieve their ambitions and reach their full potential.

We also provide them with long-term care where other options are unavailable or where this best meets the young person's needs and this is their preferred option. We believe that all young people are entitled to a high standard of care. This is achieved by providing the young people with a physically and emotionally safe environment, which is young person centred and homely. The home provides consistency and stability with structure and clear boundaries to allow young people to create trusting relationships with the adults that care for them allowing the young people to form a sense of who they are, confidence and self-worth, all from a safe and secure base. It is our aim to support and encourage young people to achieve their full potential in all areas and if appropriate return to live in the family setting to continue their young personhood.

The admission of a new resident, whether planned or unplanned is a difficult time and we aim to make any transition as smooth as possible. During the referral process consideration will be given to how the young person would adapt to the new environment, placing emphasis on how the service can meet the needs of the young person, we use a pre placement impact assessment to ensure this. We also ask placing authorities to complete a pre placement risk assessment and checklist, highlighting the presenting issues.

Admission of any young person in a planned or emergency manner would be subject to receipt of the relevant paperwork and the arrangement of a planning meeting.

Monthly Adult meetings and daily handovers and debriefs provide regular opportunities for adults to discuss each child's progress and health needs, together with wider issues of care.

Monthly reflective sessions incorporate reflective and developmental time for the adults. This space is used to discuss young people and how adults feel in relation to young people and their presenting behaviours, supporting a process of reflection, learning and development in how we support our young people. This time focuses on both the current needs of the children/young people as well as the impact on the supporting adults as we recognise that working with children and complex needs can at times be difficult and it is important that staff have a space to notice, reflect and learn about the reasons underpinning their responses. The reflective space is facilitated by a member of the clinical team, either a Clinical Psychologist or a Psychologist.

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Facilities in the Home and Neighbourhood

Acorn Cottage is a spacious home, regularly refurbished and decorated, colourful, light, warm and young person-friendly. Upstairs there are 6 bedrooms for the young people and two bathrooms for their use. There is also a bedroom for adults and a separate bathroom. Downstairs there is a large lounge/dining room, an activities room, a room to make private phone calls, a toilet, another Adults bedroom with ensuite bathroom, a fitted kitchen, utility area and offices for the adults and Registered Manager. Outside there is a large garden with a trampoline and garden activities.



The house is situated in the village of Tadley, on the border of Berkshire and Hampshire, 5 miles from Basingstoke, 9 miles from Newbury and 12 miles from Reading. It is well situated for both the M3 and M4 motorways.

The village of Tadley has several parks and is surrounded by woods and commons - great for walks, bike rides, camping, adventures, group activities and picnics! It has a swimming pool, youth clubs, a skate park, basketball courts, a library, three infant/junior schools and a comprehensive school. Basingstoke and Reading both offer numerous other sporting, recreational, cultural and educational facilities.

We have a comprehensive Location Risk Assessment that is available. It considers the risks present in the wider community, which may affect our young people and the service we provide. On completion of this risk assessment Acorn Cottage is located in a safe environment and appropriate measures are in place to ensure this.

Young people can attend one of our schools if this is appropriate or access local mainstream schools or colleges in the area.

Ethos and Philosophy

The method we are working towards and the adults use when engaging with the young people is Therapeutic Parenting this is informed by the principles PACE (Playfulness, Acceptance, Curiosity and Empathy). Therapeutic parenting is focused on developing safety and containment that is necessary for the child or young person to develop healthy attachments and engage in meaningful activities. This is a more tailored experience of caring which supports young people to develop an increasingly secure attachment. It allows for the adult to connect more deeply with the young person's internal experience so they are left feeling open and engaged and can therefore be more receptive to caring and guidance. This can also allow adults to relate with more patience so that they respond to young people rather than react.

The therapeutic model used is an integrative one because young people who have experienced abuse and neglect often have complex difficulties. Many young people have a negative view of themselves and struggle with low self-esteem. They often also struggle to make and maintain relationships. Some young people may struggle with emotional and behaviour regulation. These emotional, social and relating difficulties are often compounded by the impact of prenatal drug and alcohol use on the brain while the young person was in utero. The models used are likely to include attachment/complex developmental trauma models and models around mental health.

When young people build positive relationships with adults, and as this continues to develop, more secure attachments are made. It is likely that the therapeutic input of Acorn will enable young people to identify, understand and work through some of their underlying, more complex emotional difficulties.

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Aims and Objectives

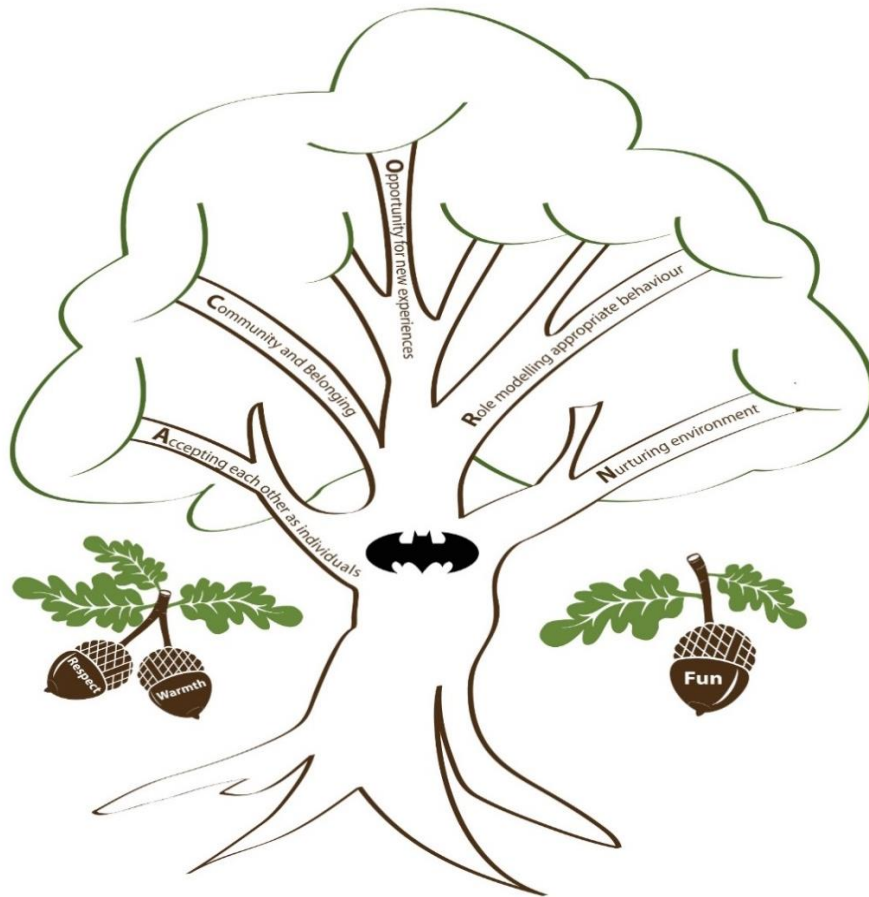
Our aims and objectives at Acorn Cottage are as follows:

- To provide a high level of nurturing care so that all the children needs are met to the highest standards.
- To provide a warm loving home where the child can feel safe, with clear, firm, consistent boundaries from adult who care for them
- To assess each young person's individual holistic needs – physical, emotional, social, cultural, spiritual and

therapeutic - and to implement plans to support these needs.

- To identify the areas of growth which would benefit the young person in their present and future life (e.g. emotional and cognitive development, development of physical, social, practical and interpersonal skills) and to implement plans and strategies which address these.
- To work closely with families and all other agencies involved (e.g. Social Services, schools, paediatricians, CAMHS services, YOT, local safeguarding board, etc.) in devising and implementing strategies which best meet the young person's needs.
- To prepare the young person fully for reintegration into their natural family, or for integration into a long-term foster placement.
- To support and prepare the natural or prospective foster family for the young person's eventual integration.
- In the case of young people who require long-term care, our aim is to prepare them for eventual independence. The adults and young people devised some core values that best described our service. All had an input into how this presented.

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Arrangements for Young People's Religious Instruction and Observance

Acorn Cottage welcomes young people from all cultural backgrounds and supports them in holding and maintaining any religious beliefs and carrying out any spiritual practices they want to. The wishes of the young person's family in respect of their cultural/religious needs are, of course, taken into consideration. We will also support them in developing their individual identity in relationship to their cultural or religious background by providing professional services to facilitate this where necessary, facilitating access to religious and cultural resources, introducing them to places of worship and accompanying them when appropriate to do so,

encouraging and facilitating their participation in any youth groups available, providing for special dietary requirements or clothing needs and making available quiet time and space for spiritual practice (e.g. prayers, meditation, rituals).

Complaints

Young people are able to voice their complaints either individually or at house meetings with the group. Any matter that cannot be resolved by either of these means must be taken to the Team Manager on duty or the Home Manager, as long as they are not the subject of the complaint. A child friendly version of the complaints policy is available to the young people and adults go through with them upon admission.

The home is open and transparent and anyone wishing to make a complaint can by contacting the home direct, the manager or the responsible individual (contact details on page 16).

Alternatively, they can contact **Ofsted: 0300 1231231**

A copy of our complaints policy is available upon request

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Behaviour Management

How we promote positive behaviour

Rewards System

At Acorn Cottage we use a target and reward system. The young people agree targets with their keyworkers and then earn ticks for positive behaviour towards their targets. The end result being the item they have chosen to work towards is purchased. The amount of time a young person is set to work towards achieving the chosen item is based on an individual basis.

Our behaviour management policy revolves around the following principles:

- Reasonable, clear, firm, consistent boundaries that are understood by all the young people and applied by all the adults;
- Positive relationships and mutual respect between adults and young people;
- Close monitoring and supervision of the young people's play and interactions (where required)
- Open communication amongst the Adults, amongst the young people, and between the adults and young people;
- Inappropriate behaviour addressed in individual sessions and community meetings.

Inappropriate behaviour that is likely to cause problems to the individual young person and the group is managed as soon as it is witnessed. In an age-appropriate and non-judgemental manner the adult explains the consequences of that behaviour and suggests alternative behaviour that leads to a positive outcome. All the adults reinforce this as often as is necessary.

There may be times when young people are encouraged to take time away from the group to calm down and reflect on their behaviour. This is not used as a punishment but to ensure everyone is safeguarded.

Consequences

The reason for any consequence is explained to the young person and implemented as soon as possible after the event, generally it relates to the negative behaviour that was presented. Consequences are appropriate and might be an earlier bedtime than usual, not being allowed to use the computer or games console or watch television in their room or not attending a group activity, as examples. Alternatively the young person may be offered the opportunity to give something back to the individual or group, for example helping to tidy any mess created. A Restorative Justice approach is favoured in reaching a suitable outcome. This is undertaken by discussion between the young person and an adult.

These policies can be requested if more information is required.

2. Engagement in the wider system

At Acorn Cottage we endeavour to work closely with all professionals who can assist us in meeting the needs of the children in our care. We maintain a positive relationship with our community PCSO's and encourage visits to the home regularly. We also have a good working relationship with our local MISPER coordinator for Hampshire police and notify of admissions and discharges from the home so they have up to date records all young people in our care.

We work closely with the LADO for Hampshire and also liaise with CAMHS who provide a diagnostic and treatment element of our care if required. We access Basingstoke Voluntary Action and liaise with them regarding workshops appropriate for

our young people to attend. We have a comprehensive Location risk assessment/ Premises Review in place. This was completed in conjunction with the Police and Hampshire Children's Social Care.

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3. VIEWS, WISHES AND FEELINGS

Young People's opinions, and those of their parents or other significant family members, Social Workers, Independent Reviewing Officers or others significant to the young person, are sought over key decisions that are likely to affect their daily life and their future. Feedback forms are sent to Social Workers and IROs and to parents at regular intervals.

Young people's views may be explored in key work sessions, in regular house meetings and by the use of questionnaires. The views of parents or significant others may be gathered during visits, by phone or by letter. All opinions expressed are promptly recorded and feedback given. We take the views of young people, parents and placing authorities into account in the development and planning of changes in the operation of the home.

The house meetings are an opportunity to consult with young people. The weekly house meeting focuses on menu choices, activity planning and household issues. The meetings are also an opportunity for the young people to reflect on how their week has been and share together what has gone well, or not so well for them. Adults will regularly review the complaints and fire procedure with the young people. The young people are consulted twice a year about the service they receive at Acorn Cottage. We also involve all young people in the development plan for the service and the annual cycle of business planning. Acorn Cottage ensures all young people have the opportunity to express their views, wishes and feelings and are provided with support appropriate to their age and understanding. Adults are trained to know that often young people who live at Acorn Cottage can at times find it difficult to express their emotions verbally so at times this can be shown through challenging behaviour by the young person.

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There is a young people's notice board in the lounge with relevant information. In the show cupboard complaints forms and suggestions forms are available for the young people and a suggestions post box that is checked regularly.

Policy in Relation to Anti-Discriminatory Practice as Respects Young People, their Families and Young People's Rights

Upon admission, enquiries are made into how the young person identifies himself, including but not limited to religion, culture, sexuality and disability. Careful consideration is given with respect to the practice of religion. If requested, arrangements are made to ensure that the young person can maintain ties to his/her religious heritage, for example, by helping them connect with local religious groups, providing for special dietary or clothing needs etc.

All Adults complete a training course on equality and diversity as part of our induction training and specific research is undertaken to ensure any young person who resides at Acorn Cottage has their individual needs met through various methods such as LGBT youth clubs or attending their place of worship, for example.

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We celebrate difference at Acorn Cottage in a number of different ways. Young people have the opportunity to go out on day trips and regular theme nights are held including meals from around the world.

We tackle discrimination through a fair recruitment policy and by challenging attitudes through the bullying policy, in community meetings and in group and individual supervision settings.

Acorn Cottage policies cover the basic safeguards for young people living away from home, The United Nations Convention on the Rights of the Young person, and the Human Rights Act 1998.

4. EDUCATION

Young people who live at Acorn Cottage will attend a range of internal and external educational provisions, which could include Acorn education and care own specialist schools and/or colleges.

Promoting Education

The educational aims for young people at Acorn Cottage, regardless of which provision they attend are as follows:

- To provide an environment that is conducive to learning where every pupil is given the support and encouragement to meet the demands of educational and personal development.
- To provide a relevant curriculum, this is appropriately broad, and balanced.
- To establish the individual needs of all pupils and to devise a programme which targets those needs and develops core literacy, numeracy and ICT skills within Key Stages 1, 2&3.
- To develop social and living skills as well as moral and cultural understanding, this will assist in preparation for adult life.
- To instil in pupils the value of education as a life- long process and to assist them in acquiring the necessary skills to develop and adapt as individuals in a changing society.
- To work in partnership with parents where appropriate and with all relevant external agencies to give pupils specialist provision of the highest quality.

At Acorn Cottage young people have a specified time and area, in which to carry out homework, with support available from the adults. There is also a library a 5 minute walk away should they prefer to use this facility and resources to complete their homework. Adults encourage young people to regard discovery and learning enthusiastically and to be open to lifelong learning.

Children living at Acorn Cottage might attend the companies local school New Barn school.

Regular meetings between the adults from Acorn Cottage and the young person's tutor will take place. The adult will then feedback to everyone on areas for educational improvement or if they are doing particularly well in a subject.

New Barn School

The Long Barn,
Welford,
Newbury
RG20 8HZ

Head Teacher: Lucina Stonell

E: Lucinda.Stonell@acornnewbarnschool.co.uk

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5. ENJOYMENT AND ACHIEVEMENT

Enjoyment and achievement

The young people are actively encouraged to make use of all the facilities available locally and to develop hobbies and interests. Opportunities include: Cubs, Scouts, Sea Cadets, Youth Clubs, Performing Arts, Skateboarding, Swimming, various styles of Dance classes, Kayaking, Bowling, Horse-riding, Football and Rugby, Tennis, Ice-skating, Army and Air Cadets and music lessons .

Recreation and Community Activity

Acorn Cottage offers a wide range of activities on and off site. Adults plan recreational activities with young people as part of daily living. Weekly house meetings on a Sunday allow young people to discuss their preference and feed them into a weekly plan of activities. Activities need to be carefully planned to balance realistic activities and leisure pursuits in line with those a young person would normally receive in a family or foster care environment.

Keyworkers actively encourage community involvement for young people if they are emotionally able to cope with activities offered within the locality. Key-workers investigate and develop links with all potential activity providers within the community setting, i.e. cadets or swimming club. All young people have the opportunity to join the local library on arrival.

A range of cultural activities are on offer, developing an understanding and awareness of differing cultures and religions. We use theme nights at Acorn Cottage and young people are encouraged to participate in researching the focus of the different themes.

Young People are encouraged to maintain existing hobbies to develop skills and self-esteem, as well as pursue new interests to gain fresh experiences, perhaps in new environments, meet new friends and learn new skills.

Young People have the opportunity to go on holiday during the school holidays. Young People are involved in the planning of the house holiday. We also plan and organise camping trips for the young people either at weekends or again in the school holidays, weather permitted.

During the school holidays there is an opportunity for larger group activities to take place such as Thorpe Park, Chessington and Alton Towers.



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6. HEALTH

Individual health care and medical needs are identified on admission to Acorn Cottage and are recorded in the young person's Placement plan and health record.

Arrangements are made to ensure that each young person resident at Acorn Cottage receives regular medical, optical and dental treatment related to their individual needs and that they live in a healthy environment where good health is promoted.

Most medical problems are dealt with by our local GPs who keep full medical records of all our young people. Every effort is made to ensure that past records are made available. We inform our Local LAC Nurse and department at North Hampshire hospital providing them with details of the young person and their Placing Authority so they are aware a new young person has moved into their area and will require an Initial Health Assessment. The GP also perform medical examinations on admittance and periodically (as per regulations) throughout their stay.

Every young person attends the local dental clinic for a health and development assessment soon after admittance and then has a dental check-up as regularly as advised during their appointment.

All young people with any type of special medical needs are encouraged to attend specialist clinics e.g. ADHD, asthma, hearing etc. in order to promote positive health care.

A record is kept of all doctor, optician or dental appointments with any treatment, prescribed medicines and any follow-up advice documented – which in turn could become part of the young person's Placement Plan.

The Adults have an important role in the health education of the young people at Acorn Cottage. The Key Worker or individual therapist provides the young person with guidance, advice and support appropriate to his age, needs, culture and wishes in relation to health issues. These include: alcohol and substance misuse, smoking, sex education, HIV infection, hepatitis and STDs. They are also taught about the benefits to health of good nutrition and diet, adequate exercise and rest, and personal hygiene.

The young people are encouraged to contribute to the weekly menu planner, to make healthy eating choices and to try a variety of food from all over the world. The menus are varied, young person-friendly, tasty and nutritious.

Details of any Specific Therapeutic Techniques used in the Home

Acorn Cottage is committed to working therapeutically, adults undergo specific training around therapeutic parenting and are empowered to support young people through these difficulties. All young people are given space and time to reflect on their actions and encouraged to manage their own behaviour, when possible. Creating a therapeutic environment enables young people to feel loved and supported and complements the direct therapy that is undertaken.

We have a clinical team in place and able to offer a wide variety of direct therapy to the child when identified as suitable for that individual child.

Any specific therapeutic sessions are only carried out by qualified therapists who are supervised in accordance with the requirements of their professional body.

Specific Therapeutic Techniques

All the approaches we use at Acorn Cottage – including therapeutic interventions, behaviour management, and our anti-bullying policy (see below) are young person-centred and consistent with therapeutic parenting approaches.

Clinical Team

Each of the Children's Services' regions are supported by a designated and integrated clinical multi-disciplinary team whose combined expertise aims to reflect the presenting needs of the children and young people living and learning within the region's homes and schools.

All the clinicians are registered with their designated regulatory bodies such as the Health and Care Professions Council, British Association for Counselling and Psychotherapy and UK Council for Psychotherapy and all receive the appropriate clinical supervision from other senior clinicians within the organisation or from externally commissioned specialists within the field.

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Line Management of the clinicians is provided by the Clinical Leads for each region who in turn are line managed by the Head of Clinical Services.

The Governance of the Clinical Team and service provision is the responsibility of the Head of Clinical Services.

Clinical Ethos and Philosophy

The method we are working towards and the adults use when engaging with the young people is Trauma Informed Practice (TIP). This is informed by the principles of PACE (Playfulness, Acceptance, Curiosity and Empathy); as well as other evidence based approaches for working with young people who have experienced trauma. TIP is focused on developing safety and containment that is necessary for the child or young person to develop healthy attachments and engage in meaningful activities. This is a more tailored experience of caring which supports young people to develop an increasingly secure attachment. It allows for the adult to connect more deeply with the young person's internal experience so they are left feeling open and engaged and can therefore be more receptive to caring and guidance. This can also allow adults to relate with more patience so that they respond to young people rather than react.

The therapeutic model used is an integrative one because young people who have experienced abuse and neglect often have complex difficulties. Many young people have a negative view of themselves and struggle with low self-esteem. They often also struggle to make and maintain relationships. Some young people may struggle with emotional and behaviour regulation. These emotional, social and relating difficulties are often compounded by the impact of prenatal drug and alcohol use on the brain while the young person was in utero. The models used are likely to include attachment/complex developmental trauma models and models around mental health.

When young people build positive relationships with adults, and as this continues to develop, more secure attachments are made. It is likely that the therapeutic input of Acorn will enable young people to identify, understand and work through some of their underlying, more complex emotional difficulties.

Clinical Model

Bowlby Wellbeing and Clinical Hub Statement of Purpose

Each of the Acorn Education and Care Children's Services' regions are supported by a designated and integrated clinical multi-disciplinary team, whose combined expertise aims to reflect the presenting needs of the children and young people living and learning within the region's homes and schools. Our aim is to improve the quality and efficiency of evidence based care, allowing us to work towards maximising quality of life in a truly integrated manner.

All qualified clinicians are registered with their designated regulatory bodies, and receive clinical supervision. Oxford and Newbury Clinical Teams are part of the Bowlby Wellbeing and Clinical Hub; and a designated clinical lead oversees the work carried out within the hub. The Regional Head of Children's Clinical Services oversees all clinical aspects of the Bowlby Wellbeing and Clinical Hub, including clinical governance.

Clinical Model

The core practice model and therapeutic approach within the Bowlby Wellbeing and Clinical Hub is underpinned by an applied understanding of complex and developmental trauma theory. Teams that work with neurodevelopmental disorders are adequately informed and influenced by recent literature in their approach and all clinicians consider appropriate National Institute of Clinical Excellence (NICE) guidance.

Assessments; going forwards, every young person will receive an initial assessment from a qualified clinician, after their admission.

Multi-disciplinary young person focussed meetings provide a space to consider each young person individually, review the current therapeutic care plan, analyse data from outcome measures and behaviour trackers and use tools such as ABAS-3 and Becks Youth Inventories. The outcomes of these meetings are to work collaboratively with home and school staff and inform the development of goals for the children and young people, which are worked towards within the home or with young people who are on an enhanced or specialised care plan. Progress towards meeting these goals is tracked and recorded.

Interventions for young people are not always 'formal;' the team work flexibly and creatively to engage young people and this may take place outside of the therapy setting. Interventions are informed by the young person's assessment. Young people who require additional clinical input but do not wish to engage or are not ready for direct clinical support, may be offered support by way of therapeutic key working sessions facilitated by the clinical team, with their allocated key worker. The clinical team may also guide the school or home staff in the delivery of some interventions. TIP is informed by the principles of Playfulness, Acceptance, Curiosity and

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Empathy (PACE); as well as other evidence based approaches for working with young people who have experienced trauma. TIP is focused on developing safety and containment that is necessary for the child or young person to develop healthy attachments and engage in meaningful activities.

Training for the adults supporting the young people in the residential homes and schools is delivered centrally through Learning and Talent. The clinical hub endeavour to offer bespoke training, dependant on need. It is acknowledged that adults that are trained in TIP are better able to respond and meet the therapeutic needs for those in their care. Additional training is offered, based on the needs of the young people, for example self-harm awareness, understanding sexualised behaviour training and specific mental health disorders.

Specialised therapeutic interventions are undertaken using bespoke interventions for complex presentations. The teams work closely with clinical colleagues in our local communities and when necessary Psychiatric support is accessed through Child and Adolescent Mental Health Services (CAMHS) within the NHS. Consultations and reflective practice are offered by the Bowlby Wellbeing and Clinical Hub to the staff within the residential homes and schools. Consultations are particularly helpful in understanding the wider needs of the young person and reviewing clinical plans. Reflective practice offers a context in which adults can consolidate and understand the experiences of working with young people who have experienced adverse childhood experiences and/or pervasive or neurodevelopmental difficulties.

House Meetings

House meetings are held weekly and are used to consult the young people about the operation of the home, to address current issues within Acorn Cottage community e.g. peer dynamics, plans for activities and behavioural issues which are impacting on other members of the community. These give the young people the opportunity to find their own voice, share their views and feelings, challenge their peers and adult members of the community, to develop empathy and to contribute to the development of the home. It also provides the opportunity for young people to raise agenda items that they would like adults to discuss in their team meeting and to receive feedback from adults' meetings.

7. POSITIVE RELATIONSHIPS

All the young people at Acorn Cottage are supported in maintaining constructive contact with their families, friends and other people who play a significant role in their lives. It is important to identify, develop and maintain key friendships for the young people.

Prior to admission contact arrangements are discussed, along with any restrictions to contact, and made clear to all parties concerned.

Written guidance for adults is provided on the rights of young people, parents, and others to maintain contact, whether the contact needs to be supervised, and when and how to encourage parents and other significant people to take part in activities with the young person in the home, at school or in the community.

All contact sessions are documented whether supervised.

Acorn Cottage makes use of local resources so that the contact can be as private and individual as possible.

If a contact is to take place away from the family home, then transport arrangements are made and agreed with the local authority in advance.

If telephone contact has been agreed this can be made with the young people after school times and before bedtimes; young people can also have the use of the telephone at the home to call friends, relatives or family. Acorn Cottage has a phone room for privacy of phone calls.

Adults offer support to the young people before and after contact, as this can be a very challenging time emotionally for them. Adults are aware that the build up to contact a few days prior to it taking place can be trigger points for challenging behaviour. This is where the use of key work sessions are used to identify what we as adults can do to support the young person and help to reduce their anxieties around the contact.

8. THE PROTECTION OF YOUNG PEOPLE

Measures to Counter Bullying

Acorn Cottage has a “zero tolerance” attitude towards bullying. Each young person signs a bullying protocol upon admission, so they are aware of our in house management of bullying incidents. The adults are trained in awareness of bullying and how to manage it. Any incident of bullying is addressed in individual sessions, in 3-way sessions or in house meetings. The young people come to understand what is deemed to be bullying behaviour, its causes and its effects on the victim and perpetrator. They come to understand what are considered to be acceptable standards of behaviour between individuals.

Further information and our Bullying policy is available upon request.

Electronic or Mechanical means of Surveillance

The bedroom doors of the young people at Acorn Cottage all have movement alarms fitted. The alarms are activated in the adult sleeping in room when the young people are settled for the night a pager is used to alert any movements. All external doors are included in the alarm system to give further peace of mind relating to the young people’s and adult’s safety during the night. They sound in a similar way to the bedroom alarms to alert adults to an intruder should anyone try and gain access to the home.

All young people have the alarm system carefully explained to them on admission and sign a consent form to express their understanding. The alarms are NOT used to restrict a young person’s liberty to leave their bedroom at will. They are there to alert adults to their movements. They are there for the young person’s safety and peace of mind.

Unauthorised Absence/Missing Young People

It is explained to all young people on admission, in language appropriate to their age and ability, that if they are away from Acorn Cottage without permission the adults will be worried as to their whereabouts and safety and will have to take action to locate them and return them home. Acorn Cottage has signed up to Hampshire’s Missing Person’s protocol and each young person has their own risk assessment for being absent from the home without leave.

After admission Acorn Cottage notify our local Police Sargent that a young person has moved in so they are aware and have details should the young person abscond. Acorn Cottage keeps a copy of the Placing Authority Missing Policy on record.

Behaviour Management

Rewards System

At Acorn Cottage we use a target and reward system. The young people agree targets with their keyworkers and then earn ticks for positive behaviour towards their targets. The end result being the item they have chosen to work towards is purchased. The amount of time a young person is set to work towards achieving the chosen item is based on an individual basis.

It is accepted that consistent guidelines and controls form an integral part of a young person’s development. As a young person develops, they gradually internalise these controls and reduce the need for external reinforcement.

Adults are expected to help and support young people to manage and control their own behaviour. The need for consequences is reduced by clearly setting boundaries of acceptable behaviour and achieving high levels of supervision and consistent care practice. High standards of behaviour should always be encouraged as a normal part of day to day living.

Adults are trained within CPI (Crisis Prevention Institute) safety Intervention Foundation level training, CPI. This training incorporates trauma-informed and person-centred approaches integral to the application of the model. With focus on prevention through de-escalation techniques through to non-restrictive and restrictive intervention. If a child in the home demonstrates increased extreme risk behaviours the home can increase this training to the Advanced/emergency training model- this is assessed through behavioural observation and assessment of risk and tailored to the individual needs of the child. This will then be refreshed every 12 months as part of mandatory training. Also covered as part of the training will be the law around physical interventions, including any changes/updates to legislation, (DFES & DOH) and regulations such as the Children’s Homes (England) Regulations.

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The CPI ethos is to ensure physical intervention is used as a last resort except in circumstances of immediate risk or threat of danger or harm as per company values and legislation. Adults to inform all young people before and after physical intervention of reasons why it has been used, such as to keep everyone safe from harm. Adults and young people are given the opportunity to re-attune the relationship, look at ways it could have been.

prevented if possible, via key working and open discussions. Debriefs are used and medical attention offered especially post physical intervention.

Physical interventions will always be used as a last resort and will only be used to ensure safety. Young people will be fully supported following any incident of physical intervention.

The homes focus on positive reinforcement and a restorative justice approach.

The principles relating to the use of physical intervention may be summarised as follows:

1. Adults should have good grounds for believing that immediate action is necessary to prevent a child from significantly injuring himself or herself or others.
2. Adults should take steps in advance to avoid the need for physical restraint, e.g. through dialogue and diversion and the child should be warned orally that physical restraint will be used unless he or she desists.
3. Only the minimum force necessary to prevent injury or damage should be applied.
4. Every effort should be made to secure the presence of other adults before applying restraint. These adults can act as assistants and witnesses.
5. As soon as it is safe, restraint should be gradually relaxed to allow the child to regain self-control.
6. Physical intervention should be an act of care and control, not punishment.

To obtain a copy of the company behaviour management policy please call Outcomes First Group on 01204 522667

Arrangements for Safeguarding

Issues relating to Safeguarding are considered an essential part of the adult's on-going training and is given high priority at adults meetings. On-going Safeguarding training is part of the mandatory training requirements the training is completed on line. Adults are also expected to access the Hampshire's on line Safeguarding training and face to face Safeguarding training.

Structures have been set up to ensure the safety of each individual young person. Adults are trained to carefully observe young people's behaviour in order to detect early signs of behavioural change that may be a result of abuse or fear of abuse.

Comprehensive Safeguarding procedures have been laid down in order to respond promptly, sensitively, professionally and effectively to any allegations of abuse, wherever these may come from. The Home Manager co-ordinates all Safeguarding referrals and investigations regarding any young person looked after by Acorn Cottage.

Any suspicion or allegation that a young person has been abused whilst in Acorn Cottage care will be dealt with in accordance with this principle. This means the company will seek to work with placing authorities and investigating authorities collaboratively and promptly to progress investigations. At Acorn Cottage the 'designated person' with lead responsibility for child protection is the registered manager.

Any adult under suspicion of having abused a young person will be immediately suspended while investigations are carried out and a report made to the Local Authority Designated Officer (LADO). The LADO works within Children's Services and should be alerted to all cases in which it is alleged that a person who works with children has: behaved in a way that has harmed, or may have harmed, a child. Possibly committed a criminal offence against children, or related to a child. They advise us on the necessary action to take while investigations are taking place.

Adults who are told of allegations of child abuse or have reasons to suspect that abuse has taken place must report details immediately to the homes designated person. In the absence of the designated person, concerns must be reported straight away to a line Manager either a Team Manager, Senior or to the Area Manager. There must be no delay in reporting caused by the unavailability of the designated person.

Acorn Education And Care

Telephone numbers:

Registered Manager, Rachel Burgess	01189814009
Alison Blyth-Bishop, Responsible Individual	07737510531
Hampshire Local Authority Designated Officer (LADO), the safeguarding unit	01962 876364
Ofsted	0300 123 1231

Policy on Child Protection and Safeguarding is available upon request.

Child Sexual Exploitation

Child sexual exploitation is potentially a child protection issue for all children under the age of 18 years and not just those in a specific age group.

Where child sexual exploitation, or the risk of it, is suspected, adults must discuss the concerns with the home manager or the designated member of staff for child protection within their service. If after discussion there remain concerns, local safeguarding procedures must be triggered, including referral to local authority children's social care and to the police.

The support needs of the young person concerned, including how they will be kept safe from intimidation and future exploitation, should also be discussed with statutory agencies and a joint plan of action agreed.

All staff will complete Sexual Exploitation training.

9. LEADERSHIP AND MANAGEMENT

Acorn Cottage is part of Children's Services Limited for the Outcome first group.

Company Management and Directorship

CEO: David Leatherbarrow

CFO: Jean-Luc Janet

COO: Richard Power

Managing Director of Children's Services: Daniel Cooke

Director of Care: Alison Blyth-Bishop

Registered Provider

Outcomes First Group

Atria | Spa Road | Bolton | BL1 4AG

Responsible Individual

Alison Blyth-Bishop

Registered Manager

The manager is Rachel Burgess

The Team of Adults at Acorn Cottage

Home Manager

Rachel Burgess joined the team as a Therapeutic Support Worker in July 2004. She had already worked with young people with autism and challenging behaviour for several years. She held NVQ3, as well as a GNVQ in Health and Social Care and a Higher National Diploma in Education. She has completed her degree in Social Work and is now a qualified Social Worker. She took over this post in 2011 and is the Registered Manager of Acorn Cottage. She completed her QCF Level 5 HSCYP Residential Management in 2012. In February 2017 she completed level 3 Therapeutic Residential Child Care.

Acorn Education And Care

There are a total of 10 full time day staff posts and the home uses night staff when needed. When there is no waking night staff member the home has two day staff sleeping in to support the young people during the night if needed. In the event of night staff working, there will always be at least one member of staff sleeping in alongside them.

Supervision, Training and Development of Adults

We consider our adults to be our most important resource and our professional approach to supervision, training and development reflects this.

The home Manager supervises the Team Managers and the Residential Support Workers alongside their planned supervisions by the Team Managers and senior staff members. All the team are supervised regularly. Frequency of supervision of bank adults depends on how often they are working.

All staff will either have the QCF level 3 or be working toward this qualification. Any new recruits who do not yet hold this qualification are put forward as soon as they have completed their probationary periods.

Responsible Individual

Alison has worked in residential care setting since 2001 in a variety of settings and roles including registered manager, responsible individual, and director of care. Alison joined outcomes first group in 2019 working on care improvement and currently managing operations in acorn residential care.

Adults

Acorn Cottage has a minimum of 3 – 4 adults on duty each shift. This level is well able to meet the needs of the young people under normal circumstances. Extra adults are made available when necessary to safeguard and promote the needs of each individual young person. Shifts are from 7:30am to 10pm. One adult sleep in upstairs, as the on-call sleep in supporting the night staff member if needed. The waking night adult works from 9:30pm -7:30am.

Adults of both genders are present on most shifts. The rota has been restructured to provide more consistent care for the young people. This avoids the change half way through the day, so the young people know that the adults that are there when they wake up will be with them for the whole day. The adults work a shift pattern of two days on working from 7:30am-10pm with an on-call sleep in during this time. There are two Team Managers, two seniors and four Residential Support workers to support the young people.

Adults details can be obtained upon request.

10. CARE PLANNING

When a young person is referred to Acorn Cottage we ask the Placing Authority to provide as much background information as possible in order for us to complete a Pre-impact risk assessment. The Social Worker is asked to complete a Pre-placement risk assessment and Pre-Placement Checklist. This helps to inform us on the suitability of the placement and the impact the referral would have on the other young people and the group.

The first three months of a young person's stay at Acorn Cottage is a settling period in which the young person's needs and the goals of the placement are clearly identified. It draws on daily reports and observations and takes into account their relationship with adults in the home, peers, family members and other significant adults. Reports from teachers about their conduct in school, academic ability and potential strengths and weaknesses, and any assessments from educational psychologists or therapists are also taken into consideration.

The settling period allows adults to identify behaviours, emotional state, the effects of the trauma they have suffered, the impact of separation from their family of origin and potential for growth. This allows adults to identify necessary areas of development to address in keywork sessions. The necessary areas of work are identified and allocated to the young person's individual therapist, Key Worker, group facilitators, adult's team, or the family or foster carers as appropriate. Progress is monitored regularly and discussed with the young person, their social worker and family (if appropriate).

Review of Placement Plans

Statutory reviews are normally held at Acorn Cottage every six months. In the case of young people who have been placed out of county, they are sometimes held at the premises of that Social Services Department to facilitate the parent's attendance when requested. Further planning and professionals meetings are held when necessary.

Appendix A - Wellbeing and Clinical Service

Who Supports the Home and Young People

Wellbeing and Clinical Service support is available for all of our young people, residential teams and school teams, and is provided by a team of clinicians which serve a 'hub' of residential care homes and schools, and includes a range of clinical professionals. Each residential setting's designated clinical support will reflect the strengths and needs of the young people that live within the setting, however additional support can also be accessed from other specialists within the wider clinical services across the group where required. This enables us to be responsive to the needs of an individual throughout their placement with us.

Appendix B – Wellbeing Model

How The Home and Young People Are Supported

Our therapeutic offer is informed by the OFG Wellbeing Rainbow; this strategy places wellbeing at the core of everything we do. The rainbow represents a tiered approach to wellbeing support at a multi-professional level:



The overarching red and orange stripes apply to every OFG employee

Wellbeing and Clinical Approach

The yellow stripe represents our core care and education teams, and how they ensure a young person's wellbeing through their nurturing and compassionate approach during every hour of a young person's day. The teams around each young person are trained to have the knowledge and skills to create inclusive communities and cultures which:-

- 1) Consistently deliver trauma informed practice (please see TIP leaflet available at request)
- 2) Use a Neurodivergent Affirmative approach (please see AAD leaflet available at request)

Acorn Education And Care

- 3) Adhere to each young person's individual support plan.

Our goal is to create inclusive communities within our residential settings to ensure young people are engaged in their development and increasing independence and have a sense of belonging in their home that will have either a primary focus based in the neurodivergent affirmative approach (Options Autism) or Trauma Informed Practice (Acorn Education and Care). These approaches are seamlessly blended to meet the specific needs of each home's individuals. As part of meeting the needs of individuals, we have developed two core clinically informed strategies – one focused on Autistic/Neurodiverse individuals (Ask, Accept, Develop) and the other focused on those with lived experience of trauma (Trauma Informed Practice principles of Co-reflect, Connect, Co-regulate). Both strategies are based on clinically informed, evidence-based practice and the most up to date research base.

Our homes embed, implement and take ownership of the concepts of AAD and CCC through training and the accreditation process. This allows us to plan, consistently deliver training and monitor best-practice in collaboration with care governance processes. The homes will self-

review to identify areas for development. Homes are able to achieve a quality standard assurance rating of Bronze, Silver or Gold according to their current level of delivery. Further information on the AAD and CCC strategies are available on request.

Universal Offer

The green stripe reflects the OFG Universal Offer. This is where the clinical service can support further around the creation and maintenance of a therapeutic environment and staff approach.

The clinical service will facilitate regular 'reflective practice' for the whole care team. These sessions recognise the emotional impact that living with traumatised young people can have on the team members' own sense of emotional and physical wellbeing. Colleagues are supported to express, reflect upon and process their thoughts and feelings in relation to their roles with the young people, their colleagues and of events and incidents. Processing in this way enables the team to continue to provide a milieu which can respond to a child or young person's communications and presenting needs therapeutically.

The clinical service will support residential settings to become TIP and AAD accredited: this may be via contribution to care staff training, offering of supervision to TIP and AAD champions, and monitoring to ensure that TIP and AAD are at the centre of the homes practice.

The clinical service might provide further targeted and bespoke training or resources to the care team at this level.

Enhanced Offer

The blue stripe reflects the OFG Enhanced Offer. This is where the clinical service is involved with individual young people, primarily indirectly, through working closely with the team around the young person to develop a shared understanding their needs. The TIP and AAD approaches are used to inform thinking and practice at this level.

Acorn Education And Care

When a young person arrives in our residential settings, an initial assessment will be completed based on the young person's existing paperwork, discussions with, and information gathered from, key adults and the young person's views. This aids the creation of a clinical overview, which includes a formulation, recommendations and agreed targets to work towards. Following the initial clinical overview, the young person may move to the universal or specialist offer.

Multi-disciplinary team meetings, attended by the clinical, residential and education team, are held regularly for all residential young people. The meeting will review the therapeutic care plan, analyse outcome measures, identify what has worked well and consider areas that remain a barrier to the young person's quality of life and achievement. The outcomes of these meetings inform relevant goals for the young people and progress towards meeting them.

At this level of offer, clinicians may also attend other professionals' meetings e.g. 'LAC Reviews'. They will also be involved in supporting the development of that young person's communication profile and sensory profiles, all in line with AAD and TIP approaches.

The enhanced offer may also involve programme led group or individual interventions, co-delivered by supervised members of the clinical service and supporting care or education staff.

The clinical service might also supervise or coach care or education staff to deliver specific interventions.

Specialist Offer

The violet stripe represents the most specialist support provided to our most complex young people. This is where clinicians have identified the need for direct involvement with a young person. This will be in addition to involvement described above.

Individual or group-based evidence-based interventions are delivered by our clinicians, who are trained in disciplines which focus on increasing wellbeing through: communication (Speech and Language Therapists); enabling access to/improving independence with functional skills (Occupational Therapists); and mental health (Psychologists and Psychotherapists). Clinicians may need to work closely with clinical colleagues in our local communities and ensure that our young people also access statutory services such as CAMHS as necessary.

Appendix C – Crisis Prevention Institute Safety

All members of the care teams within the home are trained within Crisis Prevention Institute Safety Intervention Foundation level training (CPI).

This first tier training incorporates trauma-informed and person-centred approaches integral to the application of the model. CPI focus on prevention through de-escalation techniques through to non-restrictive and restrictive intervention.

If a child in the home demonstrates increased extreme risk behaviours, the home can increase this training to the advanced and emergency training model highlighted below - this is assessed through behavioural observation and assessment of risk and tailored to the individual needs of the child. Outcomes First Group (OFG) have set a clear procedure to follow in times where a service feels there is a justified need for Advanced and Emergency Disengagements and/or Holding Skills. This procedure requires services to make an application to the Reducing Restrictive Practices (RRP) Board. CPI will then be commissioned to complete a validation visit and compile a report that is then presented to the board for authorisation.

Each level of training will then be refreshed every 12 months as part of mandatory training. Also covered as part of the training will be the law around physical interventions, including any changes/updates to legislation, (DFES & DOH) and regulations such as the Children's Homes (England) Regulations.

The CPI ethos is to ensure physical intervention is used as a last resort except in circumstances of immediate risk, threat of danger or serious harm as per company values and legislation. Care teams, where possible, are to communicate to all children before physical intervention is initiated as a possible measure to ensure they remain safe, giving an opportunity to co-regulate. After any physical intervention, this will be revisited to communicate why this was an appropriate measure – for example, to prevent serious harm to themselves or someone else. Relationships can be fractured during any incident, especially those of a physical nature, and an opportunity will be given within a reasonable amount of time for all parties to co-connect and co-reflect, re-attuning the relationship by talking through incidents, via debriefs, key working and/or mediation group work.

OFG is an affiliate member of Crisis Prevention Institute (CPI), and services subscribe to either one of the below Safety Interventions (SI) packages – Foundation, Advanced or Advanced and Emergency. The arena of education also covers residential services and health/human cater to the group's adult division. The benefits of the CPI model are that it has a tiered approach based on the needs of an individual. CPI has 3 levels - this also sits in line with the organisations well-being model.

Safety Intervention - Foundation™



Table 1: Disengagement

Name & Sequence Market	Strike	Wrist	Clothes	Hair	Neck	Body	Bite	Interventions (1 staff)		
								Low	Medium	High
Education	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Health/Human	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Timings (minutes)	90									

KEY
Green ✓ = Foundation Safety Interventions included
Red x = Skills not included

Table 2: Holding

Name & Sequence Market	Seated			Standing			Team Interventions (2 staff)	Transitions (2 staff)	Children Holds		
	Low	Med	High	Low	Med	High			Seated (chair)	Seated (floor)	Standing
Education	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Health/Human	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x
Timings (minutes)	150										

As noted, CPI SI Foundation Training is our core training that all care team adults are trained within, which incorporates trauma informed and person-centred approaches. The programme has a focus on prevention, it also teaches de-escalation skills as well as non-restrictive and restrictive interventions. The programme is Restraint Reduction Network (RRN) certificated training curricula.

Safety Intervention - Advanced™



Table 1: Disengagement

Name & Sequence Market	Strike	Wrist	Clothes	Hair	Neck	Body	Site	Interventions (1 staff)			Neck (high risk)
								Low	Medium	High	
Education	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Health/Human	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Timings (minutes)	90										15

KEY
Green ✓ = Foundation Safety Interventions included
Red x = Skills not included
Yellow ✓ = Advanced Skills included

Table 2: Holding

Name & Sequence Market	Seated			Standing			Team Interventions (2 staff)	Transitions (2 staff)	Children Holds			3 rd Person		Advanced Team Interventions (3 staff)	Transitions (3 staff)	Standing to floor transitions (Slips, Trips and Falls)		Standing to floor transitions (Slips, Trips and Falls)	
	Low	Med	High	Low	Med	High			Seated (chair)	Seated (floor)	Standing	Seated	Standing			Standing to Seated	Standing to Seated	Standing to Seated	Standing to Seated
Education	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Health/Human	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x	✓	✓	✓	✓	✓	✓	✓	✓
Timings (minutes)	150											30	20	15	35	35	35	35	

Safety Intervention – Advanced and Emergency™



KEY

Blue ✓ = Skills included

Table 1: Disengagement

Name & Sequence	Strike	Wrist	Clothes	Hair	Neck	Body	Bite	Interventions (lights)			Neck (high risk)	Emergency Responses														
								Low	Medium	High		Thumb	Dorsal Hand	Torso		Sternum		Mandibular		Columellar						
Market												Escape	Rescue	Escape	Rescue	Escape	Rescue	Escape	Rescue	Escape	Rescue	Escape	Rescue			
Education	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Health/Human	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Timings (minutes)	90											115														

Table 2: Holding

Name & Sequence	Seated			Standing			Team Interventions (2 staff)	Transitions (2 staff)	Children Holds		3rd Person		Advanced Team Interventions (3 staff)	Transitions (3 staff)	Standing to floor transitions (Slips, Trips and Falls)	Standing to floor transitions (Slips, Trips and Falls)	Emergency Team Interventions (3 staff)	Emergency Floor Holding		Seclusion									
	Low	Med	High	Low	Med	High			Seated (chair)	Seated (floor)	Standing	Seated						Standing	Standing to floor	Standing to prone	Supine	Supported Prone	Rapid Tranquillisation	Entry	Search/Removal of Unsafe Items	Exit			
Education	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓				
Health/Human	✓	✓	✓	✓	✓	✓	✓	✓	X	X	X	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓				
Timings (minutes)	150															30	20	15	35	35	35	35	40	50	50	30	30	30	30

CPI SI Advanced or Advanced Emergency programmes are designed for services that support individuals who are more likely to demonstrate more complex or extreme risk behaviours. It provides effective tools and decision-making skills to help staff manage higher risk situations, offering a wider array of verbal and physical intervention options. Both programmes are RRN certificated training curricula and provide Continuing Education Credits (CEC) and Continuing Professional Development (CPD) Credits.

We have a dedicated restraint reduction team who oversee and govern the use of restrictive physical intervention and how it can be reduced. While all our services are trained in foundation CPI, if a child or home required additional interventions, this will be assessed by the RRN team, present to the RRN board for agreement and advanced and emergency methods can be trained and risk assessed based on individual need only.

Appendix D – Outcomes First Group

Who are we?

In 2016, NFA Group combined forces with Acorn Education and Care to create the UK's leading and largest Children's care provider. With over 2 decades of experience and a positive reputation as a specialist, multi-divisional organisation, the NFA Group provided high-quality Education, Care and Fostering services to vulnerable children and young people, offering them a safe and nurturing environment in which to learn, grow and succeed.

2019 saw this position further strengthened by the alliance of the NFA Group and Outcomes First Group creating the unified Group you see today – a Group which has become a vital part of local communities in England, Scotland, Wales and Northern Ireland with a renowned reputation for quality and positive outcomes for the people we care for.

The children's and young people's part of the organisation is divided in to 2 clear areas.

1. **Acorn education and care** – this is our universal offering of SEMH care made up of 35 children's homes, 2 residential Schools and 32 schools. Our services support young people with emotional behavioural difficulties, young people diagnosed on the ASD spectrum, emerging mental health, 12-week assessment and homes that specialise in pathway to fostering and transitions to adulthood. (These services include homes under the following legal entities Bryn Melyn Care, Pathway Care homes, Hilcrest children's services and ECS homes)
2. **Options autism** – this is our specialist services for young people with complex learning disabilities including autism and social, emotional, and mental health needs made up of 20 services. (These services include homes under the following legal options autism, underlay gardens, Acorn Park, Falklands House and Holistic Care)

Within the group we have homes that are specialists under the above bracket however we understand that young people may move in and out of higher and lower acuity need based on their behavioural responses to their trauma and attachment needs so we have developed well-being and CPI models that are able to adapt to the needs of the young people in our care.

For example, a home may sit under acorn education and care with a young person under a universal package, they may then hit a period of crisis and the needs of that child may escalate. Rather than destabilising the child further and moving the young person we are able to bolt on additional training, advanced CPI needs, and additional packages of clinical investment based on the needs of the child to support that young person.

Acorn Education And Care