

Statement of Purpose



Lavender House



Lily Cottage



**Denmead
URN- 1246521**

Acorn Education And Care

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1. QUALITY AND PURPOSE OF CARE

Our Vision

We will build incredible futures by empowering vulnerable children and young adults in the UK to be happy and make their way in the world.

Our Mission

Every day we improve the lives of those we educate and look after, their families and communities through a relentless focus on learning and caring.

Aims & Objectives

Denmead is a large site where two residential homes are situated. Our homes are called Lavender House and Lily cottage. At Denmead we offer residential care to children and young people up to the age of 18. Denmead achieved an 'outstanding' rating in all areas when inspected by Ofsted in 2024.

Lavender House is a home for young boys and girls between the ages of 5- 12yrs. At Lavender House we operate as a large family and have created a warm and friendly environment where the children feel safe to form trusting and loving relationships with the adults who care for them. Lavender house has a large focus around play, education and building resilience to support our children to have positive futures. We strive to work within the best interests of all our children and will support them with their long term plan, whether that be to remain at Lavender House, transition into foster care or return to the care of their parents or family.

Lily Cottage is a home for young boys and girls from the age of 7. Lily Cottage is largely focused around supporting our children to feel safe, secure and build positive, meaningful relationships. We strive to support our young people to build resilience, emotional well-being and skills to support them to learn and develop within educational settings. We strive to support our young people with skills to prepare them for the future and in line with their long-term plan; whether this is to transition into foster care, return home or move into independence.

Both homes provide suitable levels of adults on duty in each house; with the team of adults having access to a manager or deputy manager should they require support or advice. The homes can adapt the levels of staffing available to the children should this be required based on the individual needs of the children.

We support and care for children up to the age of 18 who present with emotional and behavioural difficulties (EBD); we can also support children with learning difficulties where the primary care need is EBD.

The admission of a new child or young person, can be a difficult time so the adults aim to make every transition as smooth as possible. During the referral process careful consideration will be given to how the children would adapt to the new environment, placing emphasis on how the home can meet the needs of the child, without there being too much impact on the existing group of children.

Our Ethos

We provide a safe environment coupled with a therapeutic way of working with children and young people to promote community involvement and an understanding of the world.

At Denmead we understand the importance of creating and sustaining a nurturing environment combined with unconditional positive regard, even in times of crisis. The environment also contains consistency, stability and structure with clear boundaries. Trust, self-confidence and self-esteem are built when children recognise that the adults caring for them will not let them down, leading to positive well-being for the children and young people.

The team of adults operate a model whereby the teams work for seven consecutive days and can leave the site when it is their allocated downtimes or they are not 'on call' that evening so are therefore not required to remain on the premises and can go home. After the seven days they leave site and a new shift continue the pattern for a further seven days. This model offers a high level of consistency, which is essential for our children to grow.

Below is a brief simplified insight into the type of approaches we use at Denmead:

- ✚ Recruitment is not just based on qualifications. Life experience plays a part. We actively recruit adults of different ages, gender, cultures and religious backgrounds. Positive social role modelling is a vital part of our work.
- ✚ We provide a safe and psychologically secure environment offering structure and consistency of boundaries to children and young people, coupled with a homely living environment.
- ✚ We listen to children and young people and encourage them to be involved in all aspects of their care.
- ✚ We provide an open and honest environment for young people and adults to promote and encourage respect for each other and enhancing positive relationships with others.
- ✚ We individually tailor care, education and therapy programmes and ensure that the collaborative practices between care, therapy and educational staff provide the young people with consistency and security.
- ✚ We focus on a young person's strengths and use these as a basis to create achievable targets that address difficulties.
- ✚ We safeguard children and young people and take a proportionate approach to risks that minimises the risk of harm but also allows them to experience positive growth and development.
- ✚ We enable children and young people to explore past events, the present and their future possibilities in a safe and supportive environment.
- ✚ We enable children and young people to find new ways of resolving conflict and dealing with negative emotions. Ultimately our aim is to empower the children by giving them the skills and motivation to solve their own problems.
- ✚ We promote good communication and effective working relationships between relevant parties that keeps young people at the centre of all care planning and review.
- ✚ We provide realistic expectations of behaviour and sensitive measures of control.

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Core Values

At Denmead we devised our own 6 Core Values which both the adults and the children have had an input into. All adults, children and young people are invested in the home and our own unique established values.

Our Core Values are:

1) Understanding of the World	2) Safe Environment in which to thrive	3) Education & Self- Growth	4) Emotional well-being	5) Positive Relationships & Mutual respect	6) Positive Outcomes for all children
<ul style="list-style-type: none">• We would like all young people at Denmead to explore their abilities, develop their experiences, challenge their fears, and have fun by taking part in a range of adventures and activities provided by home, as well as understanding the world we live in and social norms.	<ul style="list-style-type: none">• We want all our children and young people to feel safe and secure and build the confidence to push themselves to meet their full potential.	<ul style="list-style-type: none">• Every child & young person at Denmead should be engaged in education, training or employment.	<ul style="list-style-type: none">• Wellbeing and Clinical Service support is available for all of our children, 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.	<ul style="list-style-type: none">• We listen and we try to understand and accept each other. We will not tolerate violence towards other community members, bullying or damage.	<ul style="list-style-type: none">• We strive to work within the best interests of all our children and will support them with their long term plan, whether that be to remain in our care, transition into foster care, return to the care of their parents or family or move into independence.• We want the best possible future for all of our children.

Location

Denmead is a rural village in Hampshire. The village is next to the Forest of Bere, and rural farm land. There are several country parks nearby and The New forest is within driving distance. Denmead is close to Hayling Island, which offers over 3 miles of beaches right on the doorstep of the Solent as well as the Harbours of Langstone and Chichester. Denmead has much to offer those that enjoy sports of all kinds. Waterlooville, Havant, Portsmouth, Southampton and Chichester are local towns, which offer a wide selection of shops, leisure activities and social events. There are several parks, a fun fair, a skate park, basketball courts, tennis courts, outdoor gyms, Judo clubs, local libraries, Cinemas and Outdoor activity centres within 30minutes travel time.

We carry out an annual location risk assessment in consultation with the local police, LADO office and other local organisations to assess the safety of the home.

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Facilities & services- Lavender House

At Lavender House we have an individualised hand painted mural on our entrance hallway, which the children helped to design. This design is focused around a 'Lavender fairy garden.' Each child has the opportunity to have their own personalised fairy in the garden when they arrive at the home to support them to feel as part of the environment.

Lavender House comprises of 8 bedrooms for our children and 2 bedrooms for the adults sleeping in. Our children are encouraged to personalise their own bedrooms to promote individuality. There is a bathroom and toilet and a separate shower room & toilet on each landing.

One landing has a snug area, filled with fluffy pillows and blankets – a great area for our children to relax or play. The adults office and managers office is located on the ground floor along with the Deputy Managers office, a shower and a separate toilet.

The ground floor of the home has a large Kitchen/Diner – which is the hub of the home. We have a utility Room, a snug/quiet reading/ play room, a large lounge filled with comfortable sofas, with lots of cushions and a large TV.

Our fairy garden



Our Dining area



Our Lounge



Our Snug



Bedroom Personalisation



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We have a fully installed sensory room within the home; inside this we have a popcorn tube, which illuminates and stimulates, interactive boards which encourage gross and fine motor skills, a soft and padded corner pod which is a safe place for children to 'hide'. Liquid floor panels with ever changing liquid patterns also encourage creativity, and stimulate minds. We also have varying light displays for different sensory needs, they can be stimulating, calming or engaging.

Our Sensory room



We also have 2 large people carriers and a smaller 5 seater car to transport the team of adults and the children to the various educational and recreational activities that are offered at Lavender House.

We have large grounds around our home and access to play park equipment, a large trampoline and plenty of garden/ outdoor activities, including a mud kitchen and music wall.



Outdoor Play



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Facilities & services- Lily Cottage

At Lily Cottage we have an individualised hand painted mural on our entrance hallway, which the children helped to design. This is focused around equality and diversity. Each child has their own personalized character on the wall to represent them.

Lily Cottage comprises of 6 large bedrooms and a bedroom for the adults on the first floor with a bathroom & toilet and 2 further shower & toilet rooms. Our young people are encouraged to personalise their own bedrooms to promote individuality and a sense of identity.

The landing has a comfy sofa area for your young people to relax and spend time together.

The adults office area is located on the ground floor with a Deputy Manager Office, second bedroom for the adults, a shower with toilet. The ground floor also consists of a large kitchen/diner which is utilised the most out of all the rooms and promotes a family atmosphere. The kitchen/ dining area has a beautiful view across the countryside and our large dining table offers lots of opportunities for group gatherings.



Our Entrance Hall



Our Kitchen/ Dining Area



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We have a utility room, games room/ snug and large living room with big comfortable sofas and a large TV.



Our Lounge



Our games room/ snug



Lily Cottage has 2 large people carrier cars to transport the team of adults and the children to the various educational and recreational activities offered by Lily Cottage.

Lily Cottage has access to a large trampoline, play park equipment and a range of outdoors activities.



Outdoor Space



Cultural Linguistic & Religious needs

At Denmead we welcome children from all cultural backgrounds and support 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. The home holds the view that discrimination is unacceptable and everyone is expected to actively demonstrate tolerance, understanding and empathy with every individual. It is the policy of all our homes to ensure that each child receives care in an environment of anti-discriminatory, anti-oppressive practice, therefore the team of adults are expected to recognise "differences" and actively support a child's cultural, ethnic, linguistic and religious needs as part of individual care.

We will also support children in developing their individual identity in relationship to their cultural or religious background in the following ways:

- ✚ By providing professional services to facilitate this where necessary;
- ✚ By facilitating access to religious and cultural resources;
- ✚ By introducing them to places of worship and accompanying them when appropriate to do so;
- ✚ By encouraging and facilitating their participation in any youth groups available;
- ✚ By providing food in keeping with any cultural dietary requirements;
- ✚ By making available quiet time and space for spiritual practice (e.g. prayers, meditation, rituals.)
- ✚ Feel encouraged to celebrate their cultural heritage.

Children can attend any appropriate religious service with adult support at established churches, mosques, temples etc., within the community, but are not obligated to do so. If required we are able to support a child attending a place of worship of their choice within the local community. The adults will respect the child's right to having a lack of faith.

Within both Lavender House and Lily Cottage we implement cultural evenings to support different cultures and encourage our children and young people to have an awareness of these. We also celebrate the following events/ religious holidays each year within our homes:

- ✚ Christmas
- ✚ New Year
- ✚ Easter
- ✚ Halloween
- ✚ Bonfire night

Complaints

If any person wishes to make a complaint about the Home, they should contact the Registered Manager; Abbie Troth. External complaints will be dealt with by the Registered Manager, or if necessary, the Responsible Individual; Teresa Coxford. Complaints can also be sent directly to Ofsted or local authorities.

On admission, children, their family and placing authority will be provided with information on how to complain, which will include a copy of the home's complaints procedure.

Wherever possible complaints are discussed at an informal level with the Registered Manager in the hope that they can be resolved as quickly as possible, with the minimum of anxiety to the young person or persons making the complaint.

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All children are aware of the complaints procedure and this is revisited with them throughout their time at Denmead. All complaints, whether made verbally or in writing are recorded on Complaint Forms and kept on the young person's case file as a formal record, available to the young person, their Social Worker and Ofsted.

We actively seek out feedback from our children, families and local authorities both formally and informally. Every 6 months we request feedback from all local authorities, parents and children to enable us to review the service we are provided and make changes to enhance this. Children and young people are also given the forum to make complaints during community meetings and key work sessions.

We actively encourage all of our children to have access to an advocate as per their wishes and feelings.

Full details can be found in our Complaints Policy which is available on request.

Safeguarding

At Denmead we are committed to providing a homely environment where children and young people can live safely, without fear of abuse, intimidation, oppression or threat from anyone. The adults will challenge bullying, or any activity intended to hurt, harm or offend another. The welfare of the children and young people living with us is paramount. All adults are clear about their role in relation to safeguarding and what action they are to take and procedures they are to follow to protect any child young person who is at risk.

Denmead is committed to living and working in an environment that encourages positive growth through a respectful approach. At Denmead, the 'designated person' with lead responsibility for child protection is Abbie Troth.

Further details can be found in our Safeguarding Policy which is available on request.

2. ENGAGING WITH THE WIDER SYSTEM

At Denmead we endeavour to work closely with all the professionals who can assist us in meeting the needs of the children and young people in our care. We pride ourselves on developing strong relationships with the wider system to ensure that our children gain access to everything they need in order to develop and thrive.

Internally, we have a strong clinical hub who we work closely with for both, direct support for our children where required, and ongoing support for the adults caring for the children.

For full details surrounding our wellbeing and clinical service please see appendix A.

We have developed a strong network of external services we can access in order to support our children; some of these include, Hampshire LADO, the police, PSCO's, CAMHS, YOT services, local authorities, health services, advocates and independent visitors.

We have a comprehensive premises review in place.

We work closely with our local schools, virtual schools and educational providers to support our children to thrive in education.

3. VIEWS, WISHES AND FEELINGS

Consultation with the children and young people

We encourage children and young people to take an active part in making decisions that affect their lives. Consultation with children and young people is viewed as an essential part of their care and development, and takes numerous forms: community meetings, involvement in Care Planning and Statutory Reviews, regular feedback obtained, key work sessions, Regulation 44 visits and inspections carried out by OFSTED.

Community meetings

The purpose of community meetings is to encourage and support our children and young people to speak out and listen. Children and young people can express their views and be involved in decisions about living at Denmead. Community meetings are held regularly (twice a week). We hold a community meeting with the children at the start of a week on a Wednesday, which is used to plan the week ahead, this includes; feedback from the home manager, planning activities, appointments and choosing the weekly menu. The homes at Denmead both operate different family rituals which the children and young people are involved in; these include things like, Friday movie club and takeaway, Sunday roast dinner and 'Sunday salon' which is an end of the week pamper session.

Our second community meeting at the end of the team working week is on a Tuesday and this is used as a reflective meeting. The purpose of this is to:

- ✚ Support children to reflect on the week that's past
- ✚ To consult the children about the running of the home
- ✚ Recap of house routines and boundaries
- ✚ Discuss the Décor of the home
- ✚ Cultural needs, ideas & upcoming events
- ✚ Opportunity to raise any compliments or complaints

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These give the children 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.

Alongside community meetings the adults complete topical and educational workshops with the children and young people to support their understanding of the world. These can include; current affairs and issues that these highlight such as; Covid- 19 & Black Lives Matter. These also allow the opportunity to support children's life skills and development by providing workshops on subjects like bullying awareness, internet safety and positive relationships.

Statutory Reviews

Children are involved in the discussion and formulation of their own care plans and are helped to understand their content and outcomes. Children and young people are encouraged to attend all Statutory Reviews. Families are consulted and involved in key decisions as appropriate.

Prior to statutory reviews key workers compile a review report based on the child or young person's development and progress; as part of this process children views are gathered and included within these reports. If the child or young person does not wish to attend the meeting they are encouraged to speak to their key worker and Independent reviewing officer to discuss any issues they wish to be raised on their behalf.

All aspects of the child's care are discussed during each meeting and minutes are taken. The young person and all professionals involved in their care is invited to attend each meeting to ensure that a consistent level of care is provided and all relevant information is shared. The meeting is then discussed with the child or young person following the meeting, either to confirm their understanding and share their feelings or to provide feedback on the meeting if they did not attend.

Key Work System

Each child and young person has an allocated key worker on each shift. Key workers monitor issues arising in all aspects of the child's life, including; emotional, behavioural, social, educational and health. The keyworker also manages the child's records, contributes to Placement Plans, Risk Assessments, and Individual Behaviour Support Plans. They compile Weekly Progress Reports for the Social Worker family and also provide reports for review and planning meetings. They undertake individual work with their key child which is planned, supervised and monitored by their line manager.

At [Lavender House](#) our children have protected time with an adult each evening at settling times prior to bedtime, this is heavily led by the child and can include things like, imaginative play, reading, or chatting. The children also have use of the homes sensory room before bed should they wish to- this supports the children to relax and unwind before going to sleep.

At [Lily Cottage](#) our children have access to time with an adult at settling times prior to going to bed, this is heavily led by the young person if they want to engage. This can include things like, play, watching TV, reading, or chatting. The young people respond well to this time and often find comfort in having a 1-1 conversation with the adults.

Feedback and Inspections

At Denmead the children are given a six monthly questionnaire which gives them the opportunity to put their views down on paper; this allows the homes to reflect on the

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children's wishes and feelings and devise appropriate strategies and changes to support them.

Feedback forms are sent to Social Workers and IROs within statutory review processes and to parents at regular intervals. All parents and social workers are asked to complete a six monthly questionnaire.

We take the views of children, parents and placing authorities into account in the development and planning of changes to the running of the homes.

All children and young people have access to trusted adults outside the organisation and the awareness of help available from independent advocacy services and help line services e.g. Child line.

Denmead is inspected each month by an independent Regulation 44 inspector. The Regional Manager also visits the home regularly as well as the home receiving Ofsted inspections at least annually. At every visit children and young people are given the opportunity to talk privately to the visiting adult should they wish to. All children and young people also have regular, protected time with their individual social workers whom they can contact whenever they wish to.

Policy & approach to anti-discriminatory practice & children's rights

We believe that all children and young people, whatever their background, ethnicity or gender, have the right to be treated fairly, equally and with respect. We encourage all children and young people to value themselves and others and to respect property. All children and young people living at Denmead have the right to live their lives free from abuse, fear and oppression and to experience safety and security. They have the right to be heard and they will be listened to.

At Denmead the children and young people can expect to enter an environment where they can look forward to positive experiences that will help repair the damage of the past and lay a foundation for future recovery, change and progression.

All children and young people who live at Denmead will be made aware of their rights and how to access independent advocacy services, their Independent Reviewing Officer, Children's Rights services and Ofsted.

4. EDUCATION

At Denmead we recognise that all children and young people have the right to education and understand the importance and significance of education in the lives of young people, and how education can enrich and empower them. Education is a high priority to us and a great deal of emphasis is placed on encouraging our children and young people to reach their optimum potential.

Educational arrangements

We recognise that all children and young people have individual needs and in order to support them, children at Denmead will attend the most appropriate education provision dependant on their individual capabilities to allow them to reach their full potential. This may range from:-

- ✚ Attending local mainstream schools
- ✚ Attending local special schools
- ✚ Accessing particular colleges, apprenticeships or training programmes, or;
- ✚ Attending our own special school provision linked to the home- Jubilee school

Despite what educational provision is accessed by our children; our care and teaching staff work in partnership with each other and the placing authorities aims to enable children and young people to work towards their goals and equip themselves as well as possible for their future.

The adults at Denmead work in partnership with the education staff and Local Authorities to support children with Special Educational needs as identified through their Education Health Care plans, IEP's, PEP meetings and statutory Reviews.

The adults at Denmead will help children and young people get to school, attend after school activities and complete their homework. They will also work with education staff and other professionals in supporting children and young people meet their identified educational and training needs. This includes; supporting children to access a mainstream provision or preparing young people to transition to college or training programmes.

At Denmead children and young people have a specified time and area within the home in which to carry out homework with support available from the adults. The adults encourage children and young people to regard discovery and learning enthusiastically and to be open to lifelong learning.

To enhance educational opportunities for our younger children we have embed early educational skills learnt at school. We use a range of fun and interactive activities to ensure that home learning is both fun and beneficial for our children. We are aware that our children are working at different levels within education, so we aim to identify any areas that need extra support and work on these with them. We include activities such as hand gym to help the children with their fine and gross motor skills which will in turn, help with handwriting skills; these include threading and playdough. We believe that basic phonics, maths, and reading are critical in a child's early education, to support this we have phonics cards and white boards to use alongside physical activities such as, disco and play phonics. We believe that all the activities we offer within the home are enjoyable and will help the children to gain confidence in their own personal educational abilities.

Registered school

JUBILEE SCHOOL

(Mixed 8-18 years)
84-86 Jubilee Road
Waterlooville
Hampshire
PO7 7RE

Head Teacher: Joanne Summers

Joanne.summers@acornjubileeschool.co.uk

Denmead has a purpose-built school called Jubilee school within 10 minutes travelling time from the home. The school is registered and achieved a 'Good' rating with outstanding features when inspected by Ofsted in 2023.

The educational aims of Jubilee School 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 2&3.
- ✚ To develop social and living skills as well as moral and cultural understanding, this will assist in preparation for adult life.
- ✚ To foster 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.

Jubilee School Referrals process

As part of the initial referrals process to the home the educational needs of the child will be assessed. Where children or young people are identified as requiring a school provision within Jubilee school; referral information will be sent to the head teacher for review. The school may then request any additional information to support them to make an effective assessment as to whether they can meet the child's needs. Additional information may include; ECHP's, PEP reports, Educational psychology reports, discussions with previous schools etc.

5. ENJOYMENT AND ACHIEVEMENT

At Denmead we actively encourage children and young people to experience a variety of activities and pursue different interests. We support them to develop existing and new hobbies. We acknowledge the importance of sport in developing an appropriate level of competition, teamwork, physical and mental health and so actively promote participation in a range of sporting activities.

At the homes we partake in various activities as a group throughout the week; this includes things like; board games, arts & crafts, games consoles, movie clubs, Sunday Salon, BBQ's, outdoor sports games, biking riding, home baking and imaginative play.

We often go off-site and visit the local area, such as the forest, the beach, swimming, cinema, flip- out, farms and fruit picking, sometimes we go further afield with our annual Merlin passes we can go to theme parks. We aim to ensure both homes have at least 1 holiday a year, this can be in the UK or abroad if appropriate.

We are aware that some activities require qualified instructors or leaders for safety and insurance purposes. Activities involving risk will be carefully checked and a risk assessment will be completed where necessary before they are undertaken.

All of the children have an input into the activities we do within the homes community meetings.

We also understand the importance of building positive social skills and experiences and that belonging to groups can help a child or young person to find their own identity. We encourage children and young people to integrate with clubs in the local area. Opportunities include:

- ✚ Bowling
- ✚ Horse-riding
- ✚ Swimming
- ✚ Gymnastics
- ✚ Football and Rugby
- ✚ Netball
- ✚ Ice-skating
- ✚ Library
- ✚ Street Dance
- ✚ Brownies and Guides
- ✚ Music clubs
- ✚ Youth clubs
- ✚ Fencing groups
- ✚ Martial arts
- ✚ Performing Arts

It is important for the adults to be aware that children and young people in care can easily become isolated from the local community. Key-workers actively encourage community involvement for children if they are emotionally able to cope with the activities offered within the locality. Key-workers investigate and develop links with all potential activity providers within the community setting.

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Preparing for Independence- Lily Cottage

At Lily Cottage we support young people to develop independent skills to equip them further for when they leave Denmead into fostering, return home, semi supported housing or into adulthood. In line with their own needs, they will learn how to cook, complete laundry, and budget, shop independently, health and safety around the home and much more. They will also at an agreed time with the social worker, have use of a mobile phone. By the time they leave they feel empowered and not so apprehensive of the responsibilities that will soon be solely theirs. They will have free time, use public transport and learn to manage their own appointments. They will be supported through the whole process so that they feel safe whilst doing so whilst they develop independence at the same time. Any independence plans will be tailored around the young person's individual needs as and only when all the professionals in their care feel, they are ready for this.

Independence skills- Lavender House

At Lavender House, although we support younger children we still have a focus around building some form of independence and skills to support them in the future this will include things like; keeping their bedrooms clean, supporting to clean the home environment, carrying out daily chores, shopping with the adults, supported to save money and some basic cooking skills supported by the adults.

Leaving Denmead

Denmead works to prepare the child into the next transition in their lives which could be into foster placement, independent / supported living or even returning to the family home. We will liaise with social worker and family to ensure all plans are in place and that it will be as smooth running as possible. Any visits will be facilitated by Denmead in an attempt to make it a successful and as pleasant as possible against any fears that they may have.

All children and young people when leaving Denmead, where appropriate, will have the option to partake in a leaving event led by the child; this can include a leaving party, a meal or a special activity.

We encourage all children to stay in touch should they need any form of support or just to let us know how they are doing. This assists in tracking success and access still to a secure and safe base for the child should it be needed.

6. HEALTH

When Children and young people come to live at Denmead we request that they have a medical check-up. Children and young people are registered with, and encouraged to attend, a local GP and dentist who will deal with both routine and emergency treatments. Each child and young person will receive a:

- ✚ 6-monthly dental check
- ✚ Annual eye test
- ✚ Annual statutory medical assessment

All children and young people may choose whether or not they are accompanied by an adult to see their doctor, optician, dentist or nurse and where practicable, may see a doctor of either gender if they prefer. The team of adults encourage children and young people to maintain good personal hygiene at all times and are encouraged to bathe daily and wash their hair regularly.

We monitor and record details related to the overall health and wellbeing of each young person and are mindful of the following:

- ✚ Health history (past illness, operations, vaccinations, immunisations, allergies, developmental milestones, prescribed medication, current treatments)
- ✚ Diet including cooking and menu planning
- ✚ Exercise and keeping fit
- ✚ Dental care
- ✚ Optical care
- ✚ Sexual health
- ✚ Side effects of any medication

We actively promote good health care. We will support children and young people to remain healthy through the provision of information and guidance on health issues, including diet, sexual health, smoking and substance abuse. Smoking is not permitted within Denmead and smoking cessation will be proactively encouraged by the adults.

For full details surrounding our therapeutic model of care, please see appendix B.

7. POSITIVE RELATIONSHIPS

Family time arrangements

At Denmead we highly value the importance of supporting and encouraging family relationships where appropriate and recognise that children and young people having links with their families and knowledge of their history is an important part of their emotional development and attachment needs.

The adults at Denmead will support all children and young people to maintain quality time with family, friends and other people who play a significant role in their lives. Prior to admission family time arrangements are discussed, along with any restrictions to these, and made clear to all parties involved. We will work with others to plan, review and implement appropriate links and agree a family time plan with the child or young person's placing authority.

Decisions about family time will feature on the agenda within statutory review meetings. Children and young people will be involved in these decisions and will be able to express their views and wishes.

The adults at Denmead are able to support and supervise time with family where this is required; it is important that this is discussed in advance to ensure that the homes have access to the resources they need in order to do this. Transport is available to take children and young people to their family time that is away from the home; this must be agreed with the local authority in advance.

Telephone calls can be made with the children or young people after school times and before bed times; children can also have the use of the telephone at the home to call friends, relatives or family. Children and young people are also supported with the tools to carry out letterbox interactions where appropriate.

All family time sessions are recorded, whether supervised or not supervised. This is important as our reports highlight any impact on the child's emotional well-being, both before, during and after these visits take place.

At Denmead we prefer not to have family time take place within our homes; this is because we are mindful of the impact this may have on our other children and young people who live with us. It can cause emotional distress and also be intimidating for the children to have strangers within their home. The homes will support families to have initial visits to the homes to see the child or young person's environment and their bedrooms as we know how important it is to reassure families that their children are being cared for in a suitable, nurturing environment. These visits will be planned in accordance with the needs of the homes.

8. THE PROTECTION OF YOUNG PEOPLE

First and foremost we have a duty to protect the children and young people in our care. We are committed to providing a homely environment where children and young people can live safely, without fear of abuse, intimidation, oppression or threat from anyone. The adults will challenge any activity intended to hurt, harm or offend another.

Bullying

Denmead is committed to ensuring the children and young people have a positive experience of living at the home. We recognise that many young people may have difficulties in establishing trusting relationships with adults and forming positive relationships with each other; this, in some cases, may have the potential to result in behaviours that are construed as bullying.

The home has a pro-active approach to identifying bullying and managing it so that it does not add to the negative experiences to which children and young people in care have already been exposed to. The home's environment supports a sense of community and a family home, reducing the likelihood of bullying taking place without the adults being able to quickly identify and act upon it.

Addressing bullying in the early stages can decrease the effect and reduce the chance of bullies themselves getting into trouble later in life.

Missing Child:

It is explained to all children on admission, in language appropriate to their age and ability, that if they are away from Denmead 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.

Each child and young person at Denmead has their own individualised missing protocol and risk assessment in place which highlights the steps to take should a child or young person go missing. Following all episodes of missing, a return home interview must be conducted by an individual person outside of the home- this is the local authorities' responsibility to arrange within the agreed timeframe.

Child Sexual or Criminal Exploitation:

Denmead is committed to preventing children and young people being subjected to child sexual exploitation or criminal exploitation. All adults at Denmead are trained in Child Protection, Online Safety & Impact of Social Media Online, CCE, Sexual Exploitation & CEOP to help spot the signs of CSE and CCE. They are vigilant when accessing the community with children, to further minimise the risk of Sexual or criminal exploitation. Where CSE or CCE is a particular risk for a child this will be explicitly detailed in their risk assessment, care plan and individual behaviour support plan.

Further details can be found in our CSE Policy and Safeguarding Children and Young People Policy which is available on request.

Infectious Disease Control:

Denmead, in conjunction with the wider company have developed a strategic system of robust monitoring and recording of infectious diseases. There are measures in place to

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protect against infection, contamination and the monitoring of symptoms amongst the team of adults and children. Risk assessments have been designed to cover most eventualities. Meetings are held remotely to ensure communication, consistence and support continue at a high level of care.

Local Authorities and Ofsted are kept up to date via email where required. The CEO and other Directors maintain positive contact with the wider company via news alerts, emails and telephone. The head of care leads Mangers Meetings frequently to ensure information sharing, ideas, support and any updates. Denmead now has the knowledge and confidence to manage the control of infectious disease with the support of the NHS and local GP input.

Further details can be found in our Infectious disease records and BCP which are available on request

Behaviour support

Rewards

The adults at Denmead are aware of how much positive regard can help to build up a good sense of self and self-esteem, we endeavour to create a setting that functions positively, making greater use of rewards and positive reinforcements, using consequences only when absolutely necessary.

While we promote positive behaviours, we realise that children and young people will make mistakes and should be able to learn from these in order to develop and be ready to be a positive member within society. However, there is a clear expectation that boundaries will be kept and if breached a series of measures are used to maintain them.

The homes are very quick to recognise, reward and celebrate when children are managing their behaviour appropriately. We operate a daily reward systems that are bespoke to the homes, which rewards positive behaviours like following daily routines and incorporates individual targets to encourage development.

Lavender House operates a bespoke reward system called 'We are all STARS.' This is focused around every child being a STAR in our eyes, despite how their week has been. Children are able to receive; Rising Star, Shooting Start or SUPER STAR.

Lily Cottage operates a bespoke reward system called 'Lets Flourish Together.' This is focused around the children growing together and despite how their week has been they have still grown or developed in our eyes. The children and young people are able to receive; Sprouting Lily, Blossoming lily or Flowering lily.

Children and young people also have the option to work towards larger rewards of their choice, based on their own interests and goals, which are tracked through individual reward charts.

Natural Consequence & Restorative Justice

At Denmead we pride ourselves in mirroring the theorists Pavlov and Skinner with rewarding children and young people for positive behaviour and applying natural consequences for learning development when negative behaviour is displayed.

Appropriate, fair, and proportionate rewards and consequences are implemented as soon as possible after the desirable or undesirable behaviour has occurred. They are linked to the

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behaviour when possible, thus ensuring the consequence has meaning for the child or young person based on their age and level of understanding.

Consequences are used sparingly and after all other alternatives have been considered. If the need is felt to impose a consequence, the child will be informed and the matter discussed with the Team Manager before deciding an appropriate consequence. Consideration will be given to the child's emotional state, understanding of their behaviour and the effect that imposing a consequence will have on future relationships.

The adults focus consequences around restorative justice and where possible the consequence is used as an opportunity to further develop relationships with the child or offer an education or learning outcome from the consequence.

Children and young people with attachment difficulties will present with a lot of low level undesirable behaviours. These behaviours will normally be managed with natural consequences within the daily routines and structures of the home. Examples of these could be; clearing up any mess, delay in joining activities, 'time in' with an adult or helping to cook dinner.

Significant consequences are given where there is an escalation in behaviour and are implemented to address serious behaviours which cannot be managed within everyday natural consequences.

In all cases, the adults adopt a restorative justice approach where the child can be given the opportunity to learn from the behaviour, rebuild relationships or give back to the community.

Use of Restrictive Physical Intervention

The use of Restrictive Physical Interventions (RPI's) should be a last resort when trying to manage and redirect behaviours. We believe that strength of relationship between adult and young person is key in managing challenging behaviours. Where possible we use all other strategies and techniques to avoid an RPI.

These strategies and techniques differ from each individual and their needs, however, some examples are:

- ✚ Active listening whereby the adults use their facial expressions, tone of voice and body language to communicate that we care for and support that child.
- ✚ Strengths, this method involves reminding the child or young person that you and others are also people who have needs, which is also important. The adults can prompt young people with cues such as "remember when this happened before and how you dealt with the situation in a really positive way".
- ✚ Prompting is commonly used to keep a young person on task or focused and gently remind them of what is coming up.

The principles relating to the use of Physical Intervention may be summarised as follows:

- ✚ All adults should have grounds for believing that immediate action is necessary to prevent a child or young person from significantly injuring themselves or others.
- ✚ The adults should take steps in advance to avoid the need for the RPI, e.g. through dialogue and diversion and the child should be warned verbally that an RPI would be used unless they stop their behaviour.
- ✚ Only the minimum force necessary to prevent injury or damage should be applied.
- ✚ Every effort should be made to secure the presence of other adults before applying the RPI. These adults can act as assistants and witnesses.

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- ✚ As soon as it is safe, the RPI should be gradually relaxed to allow the child or young person to regain self-control.
- ✚ RPI's should be an act of care and support, not punishment.

If an RPI is used to help manage a child or young person's behaviour is important that once the RPI has finished and the both the young person and the member of the team are calm, the adult initiates a repair with the young person, in the form of either a debrief or a discussion about what lead up to the RPI, we call this re-attunement and see this as a vital part of any RPI due to the learning involved for the child or young person. This is an essential part of the RPI and is where much of the learning and development of the relationship takes place.

All incidents involving the use of an RPI will be recorded in detail on an incident report.

Further details can be found in appendix C- Our Restrictive Intervention Model.

Monitoring of behaviour and incidents

The Registered Manager & Deputy Managers monitor all incidents of behaviour support, consequences and the use of restraint to identify trends and patterns that will assist with improving practice and supporting the child or young person. The information from the analysis helps to inform our care planning, risk assessing and individual behaviour support plans.

Surveillance & monitoring arrangements

The home recognises surveillance and monitoring as a priority of safety. It is important that we strike a careful balance to maintain safety and not intrude on a child or young person's privacy and independence.

There are no electronic / mechanical surveillance devices within the properties. There are waking night team members who are on duty throughout the night to support a child if they need it, as well as adults sleeping in. The entry gate to the site has a non-recording CCTV camera so that the adults can identify who is entering the site. There are no other forms of surveillance on site.

All children and young people within the homes will require consent for taking images to be completed by the placing authority or those with parental consent, alongside the authorised use of these images.

The homes have mobile phone protocols is in place for all team members detailing the safe and appropriate use of mobile phones. Mobile phones are not used for taking images; each home have specific cameras for the safe use of this.

9. LEADERSHIP AND MANAGEMENT

Registered provider, Responsible Individual & Registered manager

Denmead is owned by Outcomes First Group. Mr David Leatherbarrow is the companies CEO.

The Registered Address for the Company is:

Outcomes First Group | Atria | Spa Road | Bolton | BL1 4AG

<p>Responsible Individual (Pending Registration)</p>	<p>Teresa Coxford Hampshire Regional Manager/ RI Email: Teresa.coxford@acorneducationandcare.com</p> <p>About: I have 27 years' experience in supporting children and young people. I am currently the Director of Children's Coastal Care Consultancy where I am currently supporting as the responsible individual for OFG for eight of their homes in Hampshire and Wiltshire.</p> <p>Previous to this I was the Head of Care and responsible individual for another company where I supported a total of six homes in achieving Outstanding gradings with Ofsted and four homes with a grading of Good that were on the road to outstanding.</p> <p>Prior to this I was employed as a senior registered manager, overseeing and supporting nine other registered managers. I have also managed a children's home of seven young females where I ensured an outstanding level of care was delivered that supported the home in achieving an outstanding grading from Ofsted. This rating was subsequently retained going forwards.</p> <p>I try to always have a smile on my face and to have a positive impact on the people around me. I strive for excellence and always look for areas to develop to ensure there are opportunities for young people and adults working in the home to achieve their personal best.</p>
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<p>Registered Manager</p>	<p>Abbie Troth Email: abbie.troth@acorneducationandcare.com</p> <p>About: I was appointed as the Registered Manager for Denmead in October 2018.</p> <p>I am responsible for the day-to-day management of both Lavender House and Lily Cottage.</p> <p>I have several years' experience of working within various Childrens residential settings and have worked with a wide range of children and young people with different needs.</p> <p>I have worked at Denmead since the homes opened in 2016 and have been a consistent, stable figure for all of the children and young people within the homes.</p> <p>I like to work closely with my team of adults, the children and all professionals involved in their care to promote positive relationships and support opportunities, growth and outcomes.</p> <p>I strive to create a loving, welcoming and family environment for the children we care for and for all of the adults who support them.</p> <p>My qualifications include:</p> <ul style="list-style-type: none"> ✚ QCF level 3 in Children and Young people ✚ DDP Level 1 ✚ Accredited Safeguarding for Children's Services Managers level 1 ✚ BTEC National diploma in Health and Social Care ✚ BA Honours degree in Social and Community studies ✚ Level 5 in Leadership & Management for Residential Childcare ✚ End point assessment- Distinction awarded in Children, young people and families manager.
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Denmead places great importance on recruiting and retaining high calibre team members that possess appropriate qualifications and experience. We aim to appoint a team of mixed ages, gender and ethnicity, that individually and collectively present as positive role models for the children and young people in our care. At all times, we will have the appropriate number of adults on duty with the necessary experience and ability to meet the needs of the young people

We believe that stability and consistency are an important factor in the lives of our children and young people and this is reflected in our shift pattern. Whole time working is a system where by the adults work 7 days on duty, followed by 7 days off, which avoids the daily changeover of adult team members that can be unsettling and disrupt continuity, one of the things we are looking to maintain. During a 7-day shift, all adults are entitled to an 24 hours' time out break. Whole time working does allow the team to create a more natural

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environment for the children, and gives them the satisfaction of being able to provide support for the children from dawn to dusk.

The teams attend a full handover meeting on a Friday. The Waking night adults work across both shifts on a 4 nights on/ 4 nights off basis.

Team Structure



Full details of team qualifications and experience are available upon request.

Supervision, Training & development

The 4x4x4 model, developed by Morrison (2005) reflects the key principles of good supervision. It recognises that supervision makes a difference to adults and carers, that relationships are central to this, and that critical reflection underpins helpful discussions. This approach to supervision and supporting team members is embedded within the ethos and culture at Denmead.

We fully recognize that our team of adults forms the essential strength of our service, and we are committed to supporting individual growth and development for our employees. All adults at Denmead will go through a detailed induction process and a 6-month probationary period when they arrive at the home. All adults have access to frequent support and supervision from their line manager who they are supported to form positive, trusting, and professional relationships with.

The object of supervision is to monitor individual performance against identified standards and to support the team in their day-to-day work. Alongside this supervision offers a protected forum to form relationships, encourage and support reflection and develop team

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members in their professional role, by offering advice, guidance, training and developing action plans.

Key points of Denmead's approach to supervision are:

- ✚ All have a supervision contract.
- ✚ All team members are regularly supervised by their line manager or a senior member of the team. The frequency of supervision is dependent upon an individual's role and level of experience.
- ✚ The supervisor records notes of the supervision session on the homes cascades system which the supervisee has access to and is able to electronically sign.
- ✚ Individual supervision for team members are kept confidential unless safeguarding concerns are evident and for monitoring purposes.

Regular team meetings facilitate sharing of information, developing skills and learning retrospectively from issues/incidents. Key issues in the implementation of each child or young person's Care Plan are discussed by the whole team of adults at such meetings. Team meetings also allow the space for in- house workshops and reflection on the homes strengths and areas where improvements can be made.

As part of the induction process all team members are trained in:

- | | |
|-----------------------------|--|
| ✚ Bullying | ✚ First Aid |
| ✚ Care of Medication | ✚ Food Hygiene |
| ✚ Safeguarding | ✚ General Data Protection Regulation |
| ✚ CEOP | ✚ H&S |
| ✚ Self- harm | ✚ Infection Control |
| ✚ Child Protection | ✚ Ligature |
| ✚ Child Sexual Exploitation | ✚ Online Safety |
| ✚ Complaints | ✚ Prevent |
| ✚ Driving Awareness | ✚ Risk Assessment |
| ✚ Equality and Diversity | ✚ Crisis prevention training (MAPA Training) |
| ✚ Female Genital Mutilation | |
| ✚ Fire safety | |
| ✚ Trauma Informed Practice | |

Upon successful completion of the probation period, all team members are registered on and begin working towards the QCF in Children and young people. All team members are expected to undertake training as part of their employment and complete their qualification to enhance practice and development within the homes.

10. CARE PLANNING

Criteria for Admission

Potential referrals will be carefully assessed by the manager to ensure that:

1. The home is able to effectively meet the child's needs;
2. These needs fall within the home's Statement of Purpose;
3. Effective placement planning and risk assessment can be achieved should the referral convert into a placement.

To support the assessment, documents requested from the referring authority will include:

- ✚ The most recent statutory review report;
- ✚ All specialists' reports e.g. psychology;
- ✚ School reports;
- ✚ EHCP's;
- ✚ The core assessment;
- ✚ Family tree;
- ✚ Any relevant court reports;
- ✚ Chronology of significant events on the child;
- ✚ Risk assessments.

It is important that the placing authority provides detailed and comprehensive documentation about the child. This will enable the home to make an informed decision about the appropriateness of the referral including the capacity of the home to meet the assessed needs of the child, and any additional resources or services that may be required to achieve this.

As part of assessing the suitability of the referral, where appropriate the child should be visited in their current placement, provided with the opportunity to visit the home, and have the opportunity to be part of the decision making process about the possible move. Other professionals within the wider company should also be part of the referral process and supporting the home manager in agreeing suitable referrals; this includes input from school (where appropriate) and the clinical team to ensure we can work together to meet the needs of any identified children or young people.

Meeting the team of adults and other children is also important as this can reduce some of the anxiety they will understandably have about moving to another home. Where possible, a child's parents/carers should also have the opportunity to be involved in this process.

For all new admissions the following forms are completed:

- ✚ **Pre-placement checklist** recording all documents received from the placing authority regarding the new admission.
- ✚ **Pre-placement information / risk assessment** of the child (to be completed by the placing social worker). The home must ensure that any risks identified are subsequently addressed in the child's risk assessment.
- ✚ **Pre- placement Impact assessment** this serves to identify the potential impact on the child of being placed in the home, together with the impact they may have on the established group and each individual within it.

Emergency Placements

Whilst a planned placement is always preferable, there may be circumstances where it is appropriate to agree to the admission of an emergency placement i.e. an admission made within 24 hours of the initial referral contact. In such circumstances there is likely to be less information available about the needs and characteristics of the child.

We will only consider an emergency placement in exceptional circumstances once we have received sufficient information from the Local Authority in order to effectively access the needs and matching of the child or young person. ***The local Authority must then attend a placement planning meeting within 72hrs of the Child's placement at the home and provide all outstanding documentation.***

Following Admission to the home

We thrive to ensure that the admission of new children are well managed (whether this is planned or an emergency placement) and with little impact on the child arriving and the other children at the home.

Some of the things we do at the home to make new children and young people feel welcome is:

- ✚ The child's bedroom will have been prepared in advance, be clean, tidy, warm and homely, and provided with appropriate toiletries.
- ✚ Based on what we know about the child, we will buy them something personal for their bedroom to make it homely and comforting for them.
- ✚ We hold a welcome community meeting
- ✚ We have a welcome takeaway (our new admission chooses what this will be)
- ✚ Children guide is issued
- ✚ We send a welcome guide to the child or young person prior to their arrival; this outlines what adults are on duty they day they arrive and includes other personalised things that may need to know. When emergency admissions have been accepted and there is no opportunity to visit the home first, we will send pictures of their bedroom and other areas of the home.
- ✚ On admission or as soon as possible thereafter, the child will have an informal meeting with their key worker and, if not already provided, be given an information pack containing information about life in the home including daily routines, pocket money, use of telephones, household jobs, activities, education and how to raise concerns, complaints and the fire evacuation procedure. The child will be given the opportunity to ask questions, meet other resident children, and team members. The induction checklist will be completed with the child.
- ✚ An inventory will be made of all clothes and personal possessions bought in with the child.
- ✚ We would ensure that the child's health care/medication needs are not disrupted by the process of moving to a new home. The child must be registered with local primary health care providers (G.P., dentist, optician) and initial appointments made.
- ✚ If not already received, consent forms e.g. for medication and medical treatment, must be obtained.

Within 7 days of the placement starting there should be a **placement planning meeting** involving the home, child, their family, and the placing authority.

The purpose of the placement planning meeting is:

1. To formally reiterate the importance of the child having a voice in the process of planning for their future;

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2. To ensure no vital information has been missed in the matching and subsequent placement;
3. To clearly set out from the start the specific expectations of the placement;
4. To be precise about the level of support/interaction expected of the Social Worker and placing authority;
5. To summarise for the child the expectations of group living and school attainments at the home.

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.

A list of clinical members of the Hampshire clinical hub together with their professional qualifications are available upon request.

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)
- 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-

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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

For Children attending OFG schools

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.

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.

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For children attending alternative school provisions

The Clinical Team will liaise with the young person's school to establish whether there is a Clinical Team involved in their care. If so they will liaise with the team with consent from the relevant parties to pass on relevant information regarding presentation at home and information gathered through Child Focussed Consultations or the impact of universal strategies being utilised within the home.

The Clinical Team would complete Screening assessments to support EHCP revision where required if there was not a Clinical Team at the current school provision. An EHCP review will be recommended to include Clinical input within the school offer identifying the current needs of the young person.

Specialist Offer

For Children attending OFG schools

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.

For children attending alternative school provisions

Specialist provision would be provided within the young person's school as part of their EHCP provision and therefore liaison with the School would be an essential role of the Clinical Team where there was an identified need at this level. The Clinical Team would complete Screening assessments to support EHCP revision where required if there was not a Clinical Team at the current school provision.

In addition to the involvement described, Specialist Therapies can also be commissioned separately, where appropriate and available, for example Life Story Work, for individual young people.

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

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

Table 2: Holding

Name & Sequence	Seated			Standing			Team Interventions (2 staff)	Transitions (2 staff)	Children Holds		
	Low	Med	High	Low	Med	High			Seated (chair)	Seated (floor)	Standing
Market											
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	Strike	Wrist	Clothes	Hair	Neck	Body	Bite	Interventions (1 staff)			Neck (high risk)
								Low	Medium	High	
Market											
Education	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Health/Human	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Timings (minutes)	90										

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

Table 2: Holding

Name & Sequence	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
Market																		
Education	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Health/Human	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x	✓	✓	✓	✓	✓	✓	
Timings (minutes)	150								30		20		15		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										15	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 seated	Standing to prone		Standing to prone	Standing to prone	Supine	Supported Prone	Rapid Tranquilisation	Entry
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 into 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.

Appendix E- Care experience and qualification

Available upon request from the Registered Manager