Park Farm House Statement of Purpose



URN - SC482303

To find our more information please visit https://www.acorneducationandcare.co.uk/our-approach/our-care-homes/

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1. QUALITY AND PURPOSE OF CARE

Description of the home

Park Farm is a private Children's Home registered for up to 8 females. We offer a 52-week placement of care only or if required a care and education package with our independent SEMH school twenty minutes from the home.

At Park Farm we provide a structured, homely, and nurturing environment for children who benefit from clear boundaries and consistency from trusted adults. Within our home, committed and dedicated adults support the children to develop and achieve with the use of personalised plans and gentle guidance while adopting pace and Trauma informed practise into our everyday living. Our home specialises in providing support to children who have often experienced a fragmented education and lifestyle and who may also display behaviour difficulties because of trauma and adverse childhood experiences.

The majority of adults within the home operate a model of alternate week shift pattern, whereby the teams work 7 days on 7 days off. This provides the children and young people with continuity and consistency of care while minimising the change of adults throughout the week.



Ethos and philosophy of care

At Park Farm we offer a holistic model of care, based on a consistent approach to positive parenting, using Pace, TIP, and therapeutic support.

We have established a model of care in which adults take use of negative situations as opportunities to re frame and educate the children and young people, supporting them to navigate their way in the world as individuals. We actively embrace and strive to meet and

exceed the expectations of Children's Homes Regulations (England) 2015 and DfE guide to the Quality Standards making full use of the creation of a 'secure base' from which the children feel safe to explore the world at their own pace. As a home, the children and adults have developed everyday values that influence the way we live and treat one another.

We use the *PARK FARM acronym* which stands for-P ERSEVERE A CTIVE R ESPECTFUL K INDNESS

F RIENDLINESS A MBITIOUS R ESPONSIBLE MY HOME

At Park Farm our practice is led by such values and aligned with guidance, consistency, and security. We aim to ensure all children and young people who live here are supported to develop as individuals. We strive to support all our children into education at their own pace, whether this is mainstream school, college or a specialist provision. We have also supported successful transitions into the home environment, mainstream schools, and extra-curricular clubs.



Location

Park Farm is in the heart of the Cotswold countryside, approximately 20 miles from Oxford. Park Farm is a private environment, whilst having good links with major road and rail systems, which facilitates greater independence when appropriate.



Our location affords the opportunity of living within a small village community with the benefits of rural space and tranquillity, whilst being close enough to larger towns and cities to enjoy the activities and

experiences available. The asset of such location is reflected within our location risk assessment.

Reference was also made to <u>www.thamesvalley.police.uk/aboutus-operf-loc-crime.co.uk</u> This document will be continually reviewed. A copy of the premises review is available on request.

Park Farm is situated within an acre of gardens and provides a range of spaces and activities with equipment for the children and young people to use.

For all children living at Park Farm, we provide a safe and complete home experience in which the adults adopt a nurturing parenting approach striving to build strong trusted relationships which support the children to feel safe, valued and loved. Within our home itself, some of the things and experiences the children can expect are:

• A warm, welcoming loving home with adults who show them love, care, attention, and nurture, while supporting them to navigate and make sense of the world around them.

• Group/Individual activities, memorable experiences, and extra-curricular clubs such as horse riding, trampolining, football, gymnastics, Army cadets and singing lessons.

• Two plus holidays per year in the UK or possibly abroad with input from children and adults.

• Education – All children and young people are offered the opportunity to attend our Ofsted registered 'Good' school twenty minutes away, specialising in SEMH support in a

smaller classroom environment. Support to transition to a mainstream education setting

and accessing college courses full or part time is also supported in the home.

• Equality and Diversity of care- Each individualised plan considers an individual's cultural, linguistic, sexual orientation and religious need, while focusing on child led input, choices, and aspirations.



Our home also offers children the opportunity for:

• Personal therapy made in accordance with the individuals needs after an initial assessment with the clinical team once settled into the home.

2. ENGAGING WITH THE WIDER SYSTEM

Local community resources for children include:

• Children regularly access various community activities such as musical theatre schooling, bowling, swimming, bike riding, horse riding, girl guides, football, trampolining, and army/police cadets. These are driven by the child's choices once settling into the home and supported by the adults to engage and enjoy.

• Local Jobs and Volunteering Positions if a child wants to pursue this at an appropriate age are also supported through successful links with local small businesses.

3. VIEWS, WISHES AND FEELINGS

Park Farm is committed to the process of consultation, so children are encouraged and supported to make decisions about their lives and to influence the way their home is run. Each week a conversation is held to give the children an opportunity to discuss their views on the day-to-day management of the house. This may involve planning menus, weekly activities or discussing issues of conflict within the house.

Art pieces called 'Me Trees' are displayed and optional for the children to create. We celebrate a diverse range of festivals, and events throughout the year and the children receive keywork sessions on these. We have photos displayed around the home of children and adults as you would find in all houses, however we allow the children the option to decline having the pictures up, one display is mounted through magnets so if the children want to take their pictures down one day, but put it back up another, they are able to do so independently.



Following all key working sessions and house meetings/conversations, all significant views, discussions and expressed opinions will be recorded via online reports or house meeting logs and then subsequently actioned.

All adults will have full knowledge and understanding of all the children's needs based on a full impact assessment in consultation with significant people. The children's needs will be assessed to identify if any additional support is required to help them fully express their views and

feelings. Each day adults will create a daily log detailing the individual's routines on a system called Access Care Planning. During key-work sessions children can review and make comment on their personal plans and care plans meaning the children follow their development and their achievable targets. Adults review the views and opinions of each child to allow for change and to not take for granted what their views and opinions might be. The children are encouraged to attend their CLA reviews and PEP meetings to share their wishes and feelings.

4. EDUCATION

Children who come to Park Farm may have either received a fragmented education or have not attended School/ College for some time. If a child requires an SEMH education, we will liaise with our Ofsted registered school 7 miles away in Chipping Norton to discuss if the school is the right setting for the child and/or if they have current availability first.

This setting offers bespoke packages of academic and vocational education to meet everyone's needs. At Park Farm we also pride ourselves in having excellent links with local Primary and Secondary Mainstream schools and colleges. The adults in our home liaise with education staff when necessary or when requested by the school to make sure we are all working with and for the child with their best interest at the heart of what we do. We offer an online virtual provision for children who are awaiting a school placement, or for children who require a gentle re-entry back into education.

For our children attending mainstream or other SEMH settings we build exceptional links with the pastoral care teams, or inclusions teams within the schools, to best support the student. Some of our children may already have an EHCP therefore we keep up to date and current with the school to make sure the plan is fulfilling their needs. We will also support our children to obtain an EHCP if required by advocating to the appropriate departments involved. If any of our children have special education needs, we look to tailor the way in which we support them in accessing education.

Following each school day all children can discuss any difficulties they faced that day, with the adults in our home supporting them and enabling them to tackle these difficulties. Achievements are celebrated and recognised though means of rewards and or praise. These discussions ensure that educational attainment is promoted, and successes are discussed.

Our educational workshops and individual keywork sessions are tailored to meet the needs of the children and if requires can be led by professionals such as the Police, Barnardo's, Oxfordshire Safeguarding Children Board trainers and teachers. Topics surround - Internet safety, PRIDE, Money management, Bullying, Racism, Gardening, Black history, Alcohol, Smoking/vaping, Female empowerment, Peer pressure, Consent, Healthy relationships, and Consent.

5. ENJOYMENT AND ACHIEVEMENT

Park Farm offers a range of recreational activities for the children as part of daily living, learning, hobbies, and rewards. It is important for all employees to be aware that children in care can easily become isolated from the local community. Examples of regular hobbies include horse riding, swimming clubs, trampolining, football, Army cadets, theatre clubs, youth groups, and singing lessons. The arrangement of such is based in response to discussions surrounding likes and dislikes. In addition, weekly activities will be organised by the adults via input from the children and young people and such include walks,



afternoon-teas, beach trips, trips to the cinema, shopping, bowling, bike riding and rock climbing. Also, each year we generally take 2+ holidays with our children, in the past we have been on beach holidays, spa getaways, and adventure activity holidays.

We also complete Charity events together when our children or adults see an event, they would like to take part in and raise money for, which have included midnight walks, fun runs, sponsored bike rides, jewellery making and swimathons.

6. HEALTH

It is the responsibility of all adults to ensure that the children's care is delivered equally, irrespective of their gender, sexual orientation, background, religion, or race.

Individual health care and medical needs are identified on admission and recorded in the children's personal plan and PBRMP, as well as health records. All treatments or investigations current at the time of admission are noted and arrangements made for continuity of medical care. On admission all children and young people are registered with and have preliminary appointments with the local Optician, Dentist and General Practitioner.

At Park Farm medication and other treatments are not given without the children's consent and the consent of those with parental responsibility. Self-harm will be reported to the children's social worker and regional manager, and serious incidents will be referred to the local Accident and Emergency unit. Adults are also aware of using the 111 service when necessary.

Our Adults encourage the children to maintain good personal hygiene at all times and will tailor support with this as required. They are able to bath or shower in one of the four specific children's bathrooms. Children's personal care products are bought in accordance with their individual style and product need.

7. POSITIVE RELATIONSHIPS

At Park Farm we appreciate that adolescence is a time of great change with our children to explore and navigate. Appropriate workshops within groups or 1:1 keywork sessions will focus on these current issues to support and empower the children to take choice and control of their lives while creating positive relationships with peers, family and trusted adults around them. We wish for all our children to have a strong sense of belonging to a family, which is central to identity. At Park Farm we acknowledge that the point of admission to care can be stressful for all parties involved, however, we provide our children with an opportunity to develop stability and assist in facilitating improved family times and the relationships involved with this. We acknowledge that positive relationships can help provide children with their social and cultural understanding, which we engage with proactively to assist family visits with the use of supervision, facilitating transportation,

and funding activities if required. We also provide, on request, Keyworker and Home Manager meetings with Parents to encourage positive relationships and communications.

Following family time, the interactions are recorded, and continual support is given by all adults, and this becomes a focal point of key-work sessions. Where permitted all children are encouraged and supported to create and maintain links with friends using letter writing, telephone calls, Facetime and supervised or direct visits. Children are also encouraged to work towards free time agreements, where they will eventually be able to spend time in the community on their own or with friends, for instance, shopping with friends or going off into town for lunch when in college.



Communication / Telephone calls

Each child's needs are considered in consultation with their social worker we may introduce a mobile phone when their risk assessments indicate that they are safe to have the responsibility of a phone for personal use.

All children have access to a landline and house mobile to which they can use in accordance with their personal plans and to contact social workers, IRO's, child associated helplines and family members.

8. THE PROTECTION OF YOUNG PEOPLE

At Park Farm the Registered Manager has the responsibility to ensure that all children are aware of their rights and choices regarding making a complaint and such is done during admission and then reviewed during key-work sessions and as issues arise. Children are able to voice their complaints

either individually or by means of a group meeting. This can either be via completion of a complaint form located in home's hallway, discussing with an adult 1:1, and or raising the issues during meetings or to an independent person outside of the home.

The children are also made aware of the role of The Children's Commissioner for England and are also given the relevant information on how to complain to her. At any stage in the complaints process the children have the right to support from an external advocate and they will be assisted by

adults accessing such service. When a child arrives at the home, we encourage all social workers to pursue an IV and Advocate for their child.

All local authorities have a complaints procedure and any issue, or problem the children may have about what their social worker is doing, or what the placing authority is doing, then they can make a complaint using the placing authorities' complaints procedures.

Children's Services is committed to the principle that the welfare of the child is paramount (Children's Act 1989). Any suspicion or allegation that a child has been abused while in our care will be dealt with in accordance with this principle. This means that the Company will seek to work collaboratively with placing and investigating authorities to progress investigations swiftly.

• All allegations or suspicions of abuse within any of the homes must be discussed with the regional manager and passed on to the LADO

• Any member of staff (adult) under suspicion of having abused a child will be immediately suspended while investigations are carried out.

• All telephone discussions with outside agencies are recorded as soon as possible after the event.

Bullying

Park Farm recognises that children who reside in care, in general are a vulnerable group in society. Children in residential care may, therefore, encounter bullying in both the community and their living situations. In our home we zero tolerance for bulling of any kind.

Park Farm is clear that it will not tolerate children in the home and we see bullying as an infringement of a person's human rights.

We see our adults as being the main resource we have in ensuring our children are not bullied.

We expect the adults to do the following:

• Challenge Children who they witness bullying another person. This is done in a non-aggressive and non-confrontational way.

- Report incidents of bullying to their line manager/senior.
- Ensure they record incidents of bullying, and the action taken and inform the social worker
- Work with children in a way that enables/empowers them to complain about being bullied
- by ensuring they know about the complaints and bullying procedure and who they can complain to.
- Work with children who are bullies to enable/encourage them to alter their behaviour.
- Take time to be with children who have been the victims of bullying.
- Work with children to enable them to report any serious incidents to the Police.

• In cases of serious and persistent bullying, managers, in consultation with social workers, parents and the bully, may decide to move a child to protect those being bullied.

Managers are responsible for ensuring:

Adults are aware of all the issues that surround bullying and the impact it has.

• Adults will take steps to minimise opportunities for bullying to occur in the home and to promote a bully free environment.

• Adults are trained to be able to support children, resolve conflict and use the complaints procedure.

Radicalisation

We acknowledge that the vulnerable children that we look after may be at risk of being radicalized. This can present in many ways for example Religious Extremism, Animal Rights and or Political Activism. Park Farm also offers PREVENT training to raise awareness of signs to help support children at risk of radicalization which forms part of our mandatory training.

Child Sexual Exploitation

We acknowledge that many of the children placed with us may be at risk of CSE. At Park Farm, we offer a workshop for the children that falls age appropriate for the audience. All adults have access to a mandatory CSE e-learning course on our training platform – SHINE.

Door Alarms

At Park Farm we have door alarms on external doors, which sends a notification to a pager carried by an adult through the night when a door is opened from either inside or outside. These doors are locked during the night to prevent unauthorised persons from entering the home and to notify the pager holder than an individual has opened an external door to leave the building. In line with the Children's Homes Regulation 2015- Regulation 24, these are only used for the purpose of safeguarding and promoting welfare. Examples of these are to alert adults at night that the doors have been opened and to ensure that adults and children are safeguarded from anyone seeking to gain unauthorized access to the home. If necessary for further safeguarding concerns, we can fit a door alarm to a child's bedroom that will be activated at nighttime and turned off in the morning. These are a short-term measure and only used when consent is sought from the Local authority.

Unauthorised absence of a child

Any Child who is absent without permission is deemed to be 'at risk' due to being vulnerable. Children will be reported missing to the police subject to their missing persons risk assessments. Adults will proactively search the local area or areas of interest for the children in line with their missing protocols.

The social worker (or EDT if out of hours) and the children's parents [if appropriate] are notified at the earliest opportunity. The adults then follow a procedure of notifying all appropriate professionals while keeping a chronology and log on events ready to record on an incident report.

On admission, a missing from care protocol is created on an individual basis with consultation with placing Social Worker. Social worker will advise who should complete return to home interviews.

9. LEADERSHIP AND MANAGEMENT

The home is owned by Acorn Education and Care, a part of Outcomes First Group, Mr Richard Power is the Managing Director.

The general offices for the company are at:

Atria Spa Road Bolton BL1 4AG

www.outcomesfirstgroup.co.uk

Regional Manager: Position Vacant until May 2024 Responsible Individual: Alison Blyth Bishop Director of Care: Alison Blyth Bishop The Managing Director: Richard Power The Registered Manager: Beth Hancocks

The number, relevant qualifications and experience of persons working at the home.

The shift pattern at Park Farm consists of two teams working 7 on 7 off. The two teams with full occupancy consist of 1 Team Manager and 4 residential care workers with Bank workers to support when required. During the night we use 1 waking night with a minimum of one adult sleeping in. A new addition to 2024 saw a Deputy Manager introduced to Park Farm from with shift pattern mirroring the registered manager Monday – Friday 9-5pm, with some early and late shifts to spend time with the children. The Home Manager works in the main Monday to Friday 9am to 5 pm, however, to adopt a more realistic home setting approach as opposed to 'office hours', at times the manager works early mornings to join the children for breakfast and see them off to school and evenings to join the home for dinner. The home manager also provides on call cover and support outside of core hours as required by the service.

Wellbeing of Adults

Park Farm is committed to providing all adults with supervision and support in line with the Children's Homes Regulations. We aim to support our adults to understand and manage their own feelings and responses while at work. With consistent support we can ensure performance management of employees, minimize potential risks and work together to safeguard children. We aim to complete supervision monthly, by experienced members of staff. In addition to this, the team are given a reflective space provided by the clinical team to support their wellbeing and identify strategies to best support the children.

10. CARE PLANNING

Admission criteria and procedure

Effective and person-centred admission procedures involving the wider network of professionals from the start, to make sure all input is considered and implemented into the tailored transition. The acceptance of a referral is determined by an impact risk assessment of the child's ability to integrate into the existing group of children within the home.

Admission to Park Farm will be considered for females with:

- Social Emotional and Behavioural Difficulties.
- Who display inappropriate sexualised behaviour.
- Who have been known to abuse drugs/solvents.
- Who display conduct disorder/challenging behaviour.

- Who have mild to moderate learning disabilities.
- Who have been sexually exploited.
- Who have a history of self-harm.
- Who have been excluded from mainstream education.
- Who are able to take advantage of the living environment and support offered by the home and wider network.
- Who are on the Autistic Spectrum or have a diagnosis of ADHD.

We are unable to accommodate:

- Any child who requires continuous psychiatric supervision.
- Those currently addicted to drugs or alcohol.
- Persistent arsonists.



General Admission Procedure

Initial telephone contact with the home or referral department will be made by a local authority social worker or placement manager or completion of our referral form via our web site. During this initial contact as much information as possible is requested about the child's current situation and their particular care and educational needs. Placements will only be offered to local authorities when a completed referral form is submitted, accompanied by sufficient background information to allow an impact assessment to be made concerning the appropriateness of placing the child at Park Farm. A planned admission is always in the best interests of



the child and allows sufficient time for preparation work to be carried out by the relevant parties.

Reviews

It is the key worker's responsibility to prepare a written report for the Statutory CLA Review which will go alongside the local authorities' report. It is also the responsibility of the Key worker to ascertain verbally, or in writing, the child's views and wishes regarding the placement, goals and aims for the future and or any issues they would like to bring up. In essence, the keyworker will ensure that they are fully prepared for the review, have a clear understanding of their role in the review process and will have facilitated the child in being able to express their views or wishes. Where possible the child will attend their review, if they do not wish to in person, we will seek to adapt where possible for them.

Transition from home

As with an admission our preference would always be a planned move following decisions made during the LAC review process. For over 16yr old's this may include Pathway Planning and use of our independent flat. These will be used to supply the children with skills to manage without adult support in daily tasks. Park Farm will work with the placing authority, parents and any other organisation to ensure any transition is a positive one by responding to the needs of the child. Park Farm will also provide the child with a transition folder, which will outline things they will need to know about moving, a transition plan so this is clear for the child and workshops on things they might need to do once moved, such as booking a doctor's or banking appointment.

Appendix A – workforce experience and qualifications

Staff member Name	Start date	Job Role	Experience	Qualifications
Beth Hancocks	19.4.21	Registered Manager	Crisis intervention Leadership and Management ASD/Additional needs Young people's employment Communication Behaviour management Trauma informed approach	QCF Level 3 for the children's workforce ILM Level 3 in leadership and management Currently completing QCF level 5 residential childcare National Diploma Outdoor education Autism Awareness level 1 & 2 Mental Health First aider
Leanne Waldron	12.6.20	Deputy Manager	Therapeutic parenting Communication Crisis intervention Adult wellbeing Upskilling peers Trauma Informed Champion	QCF Level 4 Degree in Health and Social Care Mental health first aider
Coral Lee Mills	26.7.21	Team Manager	ASD Young people's employment Education Crisis intervention Adult & children wellbeing	QCF Level 4 Children's and young people's family practitioner
Paige Thomas Watts	14.2.22	Senior RCW	Customer service Team Working Time management Communication Admin Paceful Therapeutic parenting	Completing QCF Level 4 Children's and young people's family practitioner
Gavin Taylor	30.9.19	Waking night	Rehabilitation Life coaching Domestic duties	QCF Level 4
Victor Eke	30.5.23	Waking Night	Organisation managing challenging behaviours Domestic duties	Completing QCF Level 4 Children's and young people's family practitioner Master's degree in information technology law
Emily Taylor	28.3.22	RCW	Communication Therapeutic Parenting Challenging behaviours	Completing QCF Level 4 Children's and young people's family practitioner Level 3 in support work in schools and colleges Extended level 3 diploma in art and design
Georgia Bouchier	4.10.21	Team Manager	Therapeutic parenting Communication Crisis intervention	Completing QCF Level 4 Children's and young people's family practitioner
Lois Mchattie	4.10.23	RCW	Communication Therapeutic approach Animal care and management Domiciliary care	Will enrol onto QCF Level 4 at end of probation period
Zara Barnes	11.3.24	RCW	Caring for the elderly Customer Service Childcare Time Management	Will enrol onto QCF Level 4 at end of probation period Certificate in care for the Elderly

Temporary Staff member Name	Start date	Job Role	Experience	Qualifications
Lucy Wilson	4.7.2022	Bank RCW	SEMH Education Communication Therapeutic parenting	Diploma in social sciences Diploma in social welfare Completing QCF Level 4 children's and young peoples family practitioner
Edward Shepard	13.01.2017	Bank RCW	Behaviour management Crisis intervention Therapeutic parenting Communication CBT	QCF Level 3 residential childcare

Appendix B - 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.

Please find below a list of clinical members of the Bowlby Hub together with their professional qualifications. These clinicians may support any of the residential settings within the Bowlby Hub.

Athena Hub Wellbeing and Clinical Service				
Clinical Employee Name	Job title	Qualifications		
Rachel King	Play Therapist	BA Early Childhood Studies, MA in Play Therapy. Member of BAPT and BACP.		
Mary Latham	Occupational Therapist	MA (with Hons) Psychology, MSc Occupational Therapy. Member of Royal College of Occupational Therapists		
Alice Theakson	Speech and Language Therapist	PostGrad Diploma in Speech and Language Therapy, BA in French. HCPC registered and member of RCSLT.		
Charmaine Banks	Assistant Psychologist.	BSC Hons in Psychology.		
Zahra Moledina	Art Psychotherapist	BA Illustration, MA Art Psychotherapy, HCPC and BAAT registered		
Hayley Gazeley	Locality Clinical lead	MSc, BSc (Hons) (Speech and Language Therapy degree, a Masters in Psychology and Dysphagia trained		
Helen Hughs	Head of Clinical Operations (South)/ Consultant Clinical Psychologist	DClinPsych, CPsychol, MSc, BA(Hons)		
NB. list is live as of 8.12.23				

Appendix C – 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-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.

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, codelivered 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 D – 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).

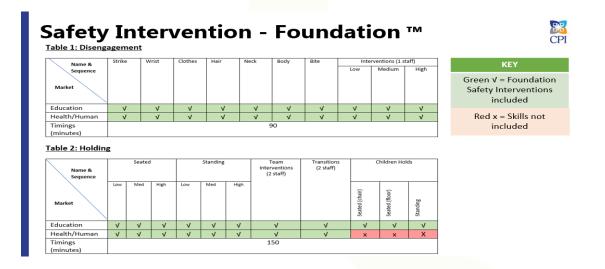
This first tier training incorporates trauma-informed and person-centred approaches integral to the application of the model. CPI focus on prevention through de-escalation techniques through to non-restrictive and restrictive intervention.

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.

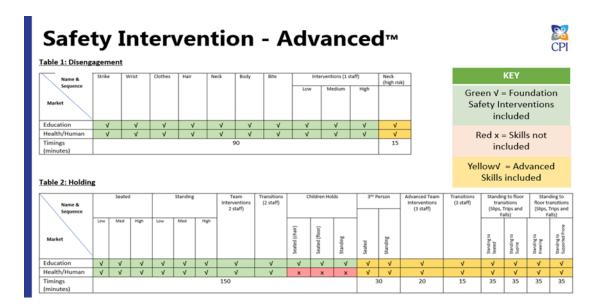
Each level of training will then be refreshed every 12 months as part of mandatory training. Also covered as part of the training will be the law around physical interventions, including any changes/updates to legislation, (DFES & DOH) and regulations such as the Children's Homes (England) Regulations.

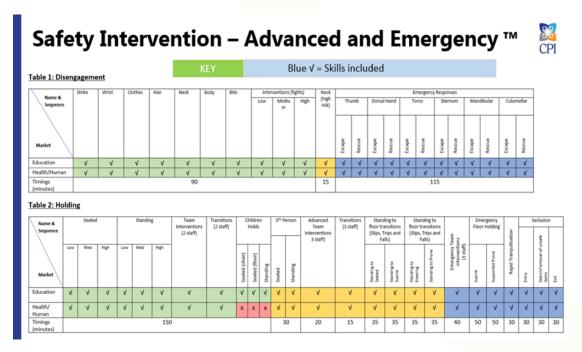
The CPI ethos is to ensure physical intervention is used as a last resort except in circumstances of immediate risk, threat of danger or serious harm as per company values and legislation. Care teams, where possible, are to communicate to all children before physical intervention is initiated as a possible measure to ensure they remain safe, giving an opportunity to coregulate. 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.



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.





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 E – 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.

- 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 wellbeing 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.

Updated by Beth Hancocks Registered Manager 10.04.2024