

OXCROFT STATEMENT OF PURPOSE



7 Oxcroft Acle Norfolk NR13 3JP

OFSTED: Unique Reference Number: 1263776

Directors: Kath Laidlaw & Dan Knight

July 2022

This is a Statement of Purpose and Function for Oxcroft Children's Home. This document has been compiled under regulation 16, schedule 1 of The Children's Homes (England) Regulations 2015

Oxcroft is registered with Ofsted at: National Business Unit Piccadilly Gate Store Street Manchester M1 2WD Telephone number: 0300 123 1231

The Directors of Clover Childcare Services Ltd. are Dan Knight and Kath Laidlaw. Dan is Responsible Individual for Clover Childcare Services Ltd, Kath is Director of Care, Gemma Bovington is the Registered Manager of Oxcroft. Together, they have endorsed this document.

Clover Childcare Services Ltd also provide outreach services. These services are social work orientated but are distinct and separate from the running of Oxcroft. At no time will any outreach work be completed at Oxcroft, however information pertaining to the outreach work may be stored at the Home.

Oxcroft SC1263776

Statement of Purpose Monitoring and Amendment record

Date	Amendment or review	Page	Detail	Initial
27/02/19	Amendment	2	Change of RM information	SPH
27/02/19	Amendment	10	Description of accommodation	SPH
27/02/19	Amendment	11	Location of the home	SPH
27/02/19	Amendment	14	Education	SPH
27/02/19	Amendment	18	Contact Arrangements	SPH
27/02/19	Amendment	23	The Registered Manager	SPH
27/02/19	Amendment	24	Training	SPH
27/02/19	Amendment	27	Staffing	SPH
18/07/19	Amendment	7	Quality and Provision of Care	SPH
18/07/19	Amendment	8	Number of YP accommodated	SPH
18/07/19	Amendment	All	Changing emphasis from one young person to two young people	SPH
18/07/19	Amendment	10	Removal of 1:1 home with regard to whistleblowing	SPH
18/07/19	Amendment	10	Reworded description of the home	SPH
18/07/19	Amendment	11	Transport to school	SPH
18/07/19	Amendment	11	Additional information re understanding children's religious needs	SPH
18/07/19	Amendment	15	Change of named school	SPH
18/07/19	Amendment	17	Addition of information on initial assessment	SPH
18/07/19	Amendment	19	Additional information on monitoring and surveillance equipment	SPH
18/07/19	Amendment	20	Review of use of RPI in the home	SPH
18/07/19	Amendment	24	Management and staffing structure	SPH

Feb 2020	Reviewed			SPH
March 2021	Reviewed			SPH
March 2022	Review		Complete rewrite of document in line with other provision in the organisation	SPH
July 2022	Amendment	32	Updated staffing	SPH
<mark>Jan</mark> 2023	Amendment	32	Updated staffing	GB
<mark>Jan</mark> 2023	Amendment	<mark>12,</mark> 12, <mark>29</mark>	Staff overnight	GB

Matters to be included in the Statement of Purpose

(in line with Children's Homes (England) Regulations 2015; Regulation 16 (1), Schedule 1)

Quality and purpose of care

1. A statement of the range of needs of the children for whom it is intended that the children's home is to provide care and accommodation.

2. Details of the home's ethos, the outcomes that the home seeks to achieve and its approach to achieving them.

3. A description of the accommodation offered by the home, including-

(a) how accommodation has been adapted to the needs of children;

(b) the age range, number and sex of children for whom it is intended that accommodation is to be provided; and

(c) the type of accommodation, including sleeping accommodation.

4. A description of the location of the home.

5. The arrangements for supporting the cultural, linguistic and religious needs of children.

6. Details of who to contact if a person has a complaint about the home and how that person can access the home's complaints policy.

7. Details of how a person, body or organisation involved in the care or protection of a child can access the home's child protection policies or the behaviour management policy.

Views, wishes and feelings

8. A description of the home's policy and approach to consulting children about the quality of their care.

9. A description of the home's policy and approach in relation to-

(a) anti-discriminatory practice in respect of children and their families; and

(b) children's rights.

Education

10. Details of provision to support children with special educational needs.

11. If the home is registered as a school, details of the curriculum provided by the home and the management and structure of the arrangements for education.

12. If the home is not registered as a school, the arrangements for children to attend local schools and the provision made by the home to promote children's educational achievement.

Enjoyment and achievement

13. The arrangements for enabling children to take part in and benefit from a variety of activities that meet their needs and develop and reflect their creative, intellectual, physical and social interests and skills.

Health

14. Details of any healthcare or therapy provided, including-

(a) details of the qualifications and professional supervision of the staff involved in providing any healthcare or therapy; and

(b) information about how the effectiveness of any healthcare or therapy provided is measured, the evidence demonstrating its effectiveness and details of how the information or the evidence can be accessed.

Positive relationships

15. The arrangements for promoting contact between children and their families and friends.

Protection of children

16. A description of the home's approach to the monitoring and surveillance of children.

17. Details of the home's approach to behavioural support, including information about—

(a) the home's approach to restraint in relation to children; and

(b) how persons working in the home are trained in restraint and how their competence is assessed.

Leadership and management

18. The name and work address of—

(a) the registered provider;

(b) the responsible individual (if one is nominated); and

(c) the registered manager (if one is appointed).

19. Details of the experience and qualifications of staff, including any staff commissioned to provide education or health care.

20. Details of the management and staffing structure of the home, including arrangements for the professional supervision of staff, including staff that provide education or health care.

21. If the staff are all of one sex, or mainly of one sex, a description of how the home promotes appropriate role models of both sexes.

Care planning

22. Any criteria used for the admission of children to the home, including any policies and procedures for emergency admission.

Quality and Purpose of Care

A statement of the range of needs that the home is intended to meet and the characteristics of children to be cared for by the home (including criteria used for admission (including emergency admissions)).

Oxcroft can accommodate up to two young people who will be between the age of 7 and 17 years on admission. The home can accommodate young people of either gender.

Oxcroft offers medium to long-term placements for young people:

- With emotional and behavioural difficulties.
- With complex health and social care needs.
- With a history of insecure attachments and challenging behaviour.
- Who have experienced break down of numerous placements in foster care or children's' homes.
- Who are in need of a core assessment

The home is not set up to accommodate young people with:

- Physical disabilities.
- Severe learning disabilities. .
- Acute mental health problems.
- Severe drug dependency
- Fire setters as the building does not have a sprinkler system in place.

Wherever possible young people will be accommodated in a planned manner though Oxcroft is able to accept emergency placements subject to

- Receipt of as much information about the young person as is possible at the time of placement
- Agreement from all parties that the young person is suitable for accommodation in the service
- Agreement from all parties that Oxcroft is able to meet the identified needs of the young person.

• A short-term plan being in place with an agreed review date

Details of the home's ethos, and the outcomes that the home seeks to achieve and its approach to achieving them.

Oxcroft is a detached house in the village of Acle, Norfolk. Originally a private dwelling, this property has been converted into a comfortable two bedded Therapeutic Children's Home.





Our experience informs us that theories and techniques for direct work with children cannot flourish until the foundations of sound residential childcare practice are in place. We understand that when children come into care or change placements they are often going through a period of crisis, their

lives may feel chaotic, overwhelming and frightening. Our first aim is to help children in our care feel safe and emotionally contained.

We have created a warm family type environment, which is decorated and furnished to a high standard. Our routines are practical and predictable, creating an atmosphere of stability and helping the children to feel secure. Our staff team is skilled, experienced, resilient and immensely dedicated.

At Oxcroft we believe that the young people we look after should not just be well cared for, but also feel cared about. We believe that expressing authentic warmth and unconditional positive regard for children in our care is key to helping young people achieve their potential. Our goal is to create an environment where young people can feel safe and recover from the difficult experiences and disruption they have experienced in their lives and to assist them in achieving individual success, maximising their life chances.

We will treat the young people as individuals recognising their unique needs. We will take into account their religion, race, culture, disability, sexual orientation and gender in how we care for them. We also recognise and appreciate that most young people

have strong opinions about the way they want to be cared for and listened to and we endeavour to incorporate the young people's ideas into the way we care for them.

Our approach to caring for young people encompasses the core outcomes from the DfE publication '**help children achieve more'.** We will ensure our services are delivered in such a manner that we actively support and encourage the young person to:

- Be Healthy
- Stay Safe
- Enjoy and Achieve
- Make a Positive Contribution
- Achieve Economic Well Being

The aims of the home are:

- To offer high quality residential care for up to two young people on a medium to long-term basis until the date of their 18th Birthday.
- To provide therapeutic re-parenting by a caring and skilled staff team.
- To provide consistent care and nurturing routines in a family type environment.
- To create an age appropriate independence plans which will develop and enhance each child's skills and will help to prepare them for leaving care.
- To provide a stable and secure environment where the young people can thrive and reach their true potential.
- To provide facilities and services to enable young people to achieve positive change in their lives.
- To support young people educationally, helping to create individualised programmes that help to develop their social and emotional well-being enabling them to engage with life and learning.

In order to achieve these aims, the following objectives have been set:

- The creation of a warm, safe and welcoming environment.
- The development of a multi-skilled, highly trained and experienced staff team.
- The development of an effective key worker system.
- Professional assessment and recording systems.
- To encourage young people to develop and maintain positive relationships with families, staff, peers and the wider community.
- To equip the young people with the necessary skills to deal with adverse situations.
- We will actively pursue a full service from all relevant agencies e.g. Health, Education, working collaboratively to ensure that the young people's needs are met and that his/her welfare is promoted to the fullest extent.

- We will actively promote and advocate for care plans to be drawn up and carried through to meet the young people's educational, religious, cultural, linguistic and dietary needs.
- To provide an independence package for young people as they prepare for leaving care and living (semi-) independently.

Clover Childcare Services Ltd, as an organisation, is opposed to all forms of discrimination, in particular against young people, in any form that may prevent that young person from reaching their full potential. To this end the staff team will work consistently to prevent discrimination on the grounds of race, colour, nationality, ethnic or social origin, language, culture, gender, sexual orientation, age, religion, disability, political or other opinion, birth or status.

Staff are committed to maximising the potential of all the young people we work with. Any discrimination by young people or adults, no matter how subtle, will be challenged. Should staff witness any discrimination towards any young person by another member of staff they will be expected and encouraged to "blow the whistle".

Staff are encouraged to promote the rights of young people who may wish to make complaints by assisting them in whatever way the young person wishes, including framing the complaint with the young person and passing on that complaint to the appropriate body.

Children's Rights

Every young person placed at Oxcroft has the right:

- To be protected from harm.
- To be listened to and to be taken seriously.
- To ask for information and advice.
- To have a safe and secure environment.
- To have warmth, food and shelter.
- To receive a meaningful education.
- To be supported to attend and participate in a range leisure activities.
- To be treated with respect, dignity and worth.
- To make mistakes.
- To be responsible for themselves, to have their rights respected and to respect the rights of other people.
- To privacy.

A description of the accommodation offered by the home, including how accommodation has been adapted to the needs of children cared for by the home.

The Home is a four double-bedroomed detached property in a small housing estate. On the ground floor there is a light and airy entrance hall, a large lounge/diner with sliding doors to the garden, a spacious games/quiet room and an under-stairs cupboard. There is also a well-appointed kitchen which has a range of low and eyelevel units, electric hob and cooker and washing up facilities. To the back of the kitchen is a utility room and downstairs toilet.

Upstairs there are four well-proportioned double bedrooms, with en-suite facilities to one bedroom which is the designated staff sleeping in room. The two bedrooms to the rear of the property are children's bedrooms with the fourth room being the staff office with facilities for a second member of staff to sleep in when required. There is also a bathroom with shower facilities, a mirror and a pedestal sink for use by young people.

The front of the property has been block paved and provides parking for three to four vehicles. To the rear is a private garden with a six feet high fence all around. There is also a small patio area, a shed, summer house and water butt.

A description of the location of the home

Oxcroft is situated in the village of Acle in the heart of the Norfolk Broads. The home is situated close to local amenities including a garage with a shop, a large co-op store, a public library and a sports centre.

Oxcroft is a detached brick built property with its own private garden at the back of the home. It has a small patio which overlooks the garden. The front of the property is block paved for off-road parking.

Oxcroft is within walking distance of the local railway station and there are good links by bus to Norwich and Great Yarmouth. In addition all our staff must have a valid driving licence so that we can transport our young people to social activities which may be held in more rural areas without such good transport links. This is also important when transporting them to school as they attend The Stables Independent School in Brumstead.

There is good street lighting in the local area meaning that night time activities on foot, such as shopping or visiting the leisure centre can take place safely. We have clear activity risk assessments in place. There are also clear protocols for missing young people in place agreed with the local police.

We have undertaken a comprehensive location risk assessment before deciding the location is suitable for a children's home and this has included liaison with the local police safer neighbourhood teams, Broadland District Council and Norfolk County Council.

The arrangements for supporting the religious, cultural and linguistic needs of children accommodated in the home including anti-discriminatory practice.

At Oxcroft we acknowledge, respect and value diversity. We are committed to facilitating children's religious needs and promoting their religious practice.

We seek information about a child's religious needs as part of the referral process in order to prepare fully to support him/her sensitively with issues such as dietary needs, special days and time and space to worship. It is important to us that when children move into Oxcroft they do not lose touch with their religious heritage. Staff will promote the young person's rights in this regard and use Holy Days and Saint's Days to promote the young person's faith in the Home.

We respect and value cultural diversity and will promote young people's cultural and religious beliefs and activities. These beliefs and activities will be identified through the care planning process. All religious and cultural activities important to the young person and their family will be vigorously researched and thoroughly supported by the staff team. To facilitate this we will:

- Be proactive in assisting to maintain modes of dress, ceremony, diet and custom.
- Provide transport, where practicable, to places of worship and meeting places.
- Make every effort to ensure important aspects of culture and religious heritage are not lost.
- Provide access to sources of information that will encourage the young person's cultural and religious understanding and beliefs.
- Assist the young person to obtain language support where and when required.
- Not tolerate discrimination against young people on the grounds of race, religion or culture under any circumstances. Any incidence of this type of behaviour will be challenged individually and through the House meetings. If discrimination by staff is wilful the matter will be treated via the disciplinary process.

We recognise that rural Norfolk is not as culturally diverse as some larger city areas. In order to promote cultural diversity and combat discrimination, staff at Oxcroft will educate the young people about religions and cultures encouraging them to join in festivities and celebrations of Holy and Saints days, visit larger cities and communities inspiring them to ask questions and imagine their own lives if they were born in a different time or to a different culture.

Further guidance on these issues can be found in the home's policy on antidiscriminatory practice.

Complaints about the home and access to the home's complaints policy

At Oxcroft we seek to promote openness and transparency in all our practices. We welcome, expect and accept feedback from the children, their families, social workers, Independent Reviewing Officers, Teachers, other professionals and members of our local community and visitors to the homes. In order to facilitate this we have bound books for recording compliments and complaints and a written policy about complaints. This policy is available upon request.

When a child is admitted to Oxcroft they will be made aware, as will their family and social worker, of our complaints policy. A summary of this is contained in: 'The Parent's Guide' and our 'Statement of Purpose' and the young person's welcome booklet.

We actively encourage our young people to explore their feelings constructively. Within this context if they feels that they have been treated unfairly or disrespectfully they will be made aware of their right to complain. Wherever possible, complaints are discussed on 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 raising the concern.

Many complaints are, upon discussion, an expression of dissatisfaction and can usually be explored and remedied to the young person's satisfaction. For those complaints that cannot be remedied by informal discussion, the young person will be given the opportunity to follow the process through to formal investigation and resolution. The manager will ensure that the complaints process has a finite time span, agreed with the young person, workers and professionals at the outset of the investigation. The initial timeframe for resolving complaints should be within 28 days.

Our young people will:

- Be listened to and heard by the staff team.
- Reassured by the staff team that they will not be punished for making a complaint.
- Have their complaint acted upon.
- Be given support throughout.
- Be kept informed throughout.
- Be given names and telephone numbers of organisations who can help them independently if they are dissatisfied e.g. Ofsted, Independent Reviewing officers, their Local Authority Complaints Officer, Voice (independent and confidential advocacy service for young people), Child line. These will been given to the young people on arrival in the home to keep in their bedroom and are included in each young person's individualised Welcome Booklet.

Complaints can be raised with any member of staff on duty or with the Registered Manager directly. Unless the complaint is against the Registered Manager it is the manager who will conduct any investigation. The manager will inform the young person's social worker and other parties with a legitimate interest in the welfare of the young person and decisions may be made to involve other professionals such as Child Protection Teams.

All complaints, whether made verbally or in writing, are recorded in the Complaints Book which is a numbered and bound log inspected regularly by Ofsted. All complaints, their investigations, and their outcomes will be recorded in the complaints log and shared fully with those involved. A record of the complaint will be kept on the young person's case file as a formal record, available to the young person and their social worker.

At Oxcroft we acknowledge that complaints can evoke strong feelings in children and adults. These feelings and staff responses to them are regularly discussed in team meetings as part of our commitment to openness and transparency in our practice.

Views, wishes and feelings

A description of the home's policy and approach to consulting children about the quality of their care

Oxcroft recognises the individuality of all young people; each with their own strengths, preferred ways of expressing themselves and clear ideas about how they could best be cared for. Therefore it is important that we, at Oxcroft, use a variety of formal and informal means of consulting with and seeking feedback from them about the running of the home, and how it affects their lives.

Within the culture of the Home staff will be talking and listening to our young people at all times of the day while involving them in the routines of the home. This could include whilst riding in cars, around the dinner table, settling time at night or whilst unpacking the shopping.

We also recognise the benefits of having more formal discussions between staff and children.

This will be done through:

- Placement Planning and regular review.
- Creating individual placement routines.
- Key-working sessions (including a record of their wishes and feelings in their "Can I Have A Chat? book").
- 'House meetings' where children and staff can discuss the routines of the home, things we could do better and how we treat each other.
- Statutory Reviews.
- Regulation 44 visits by an Independent Visitor
- Comments included in the Regulation 45 review of the quality of care being provided which is completed by managers in the home every three months
- Young people are actively involved in the reviewing and updating of the Local Area Risk Assessment ensuring that we obtain a child's perspective on considered risk rather than relying solely on risk perceived by an adult
- Feedback forms when children leave the Home.

We encourage our young people to contribute to the running of the Home, as it is they, to a large extent, who are able to identify problems associated with day to day living. Each young person should be given the opportunity to comment on all aspects related to the running of the Home including their own individual activities, the menu, contents of the Home, house rules and the selection and recruitment of potential staff.

It is our view that this level of young person's participation in the running of the Home prevents care practice becoming institutionalised. It is also our view that seeing their ideas being valued and acted upon creates for children a sense of self-worth and efficacy.

Education

Details of provision to support children with special educational needs

The nominated school will apply for an education, health and care (EHC) Plan for each young person if they have special educational needs. This will set out clearly what their needs are and what level of support the young person requires in order to be successful in school. If needed, Oxcroft will provide a member of staff to support the young person in school on a 1:1 basis or Clover Childcare Services will employ a specific teaching assistant for this purpose.

Where the home is dually registered as a school, details of the curriculum provided by the home and the structure and management of the arrangements for education

The Home is not dual registered as a school.

Where the home is not registered as a school, the arrangements for children to attend local schools and the provision made by the home to promote children's educational achievement

Oxcroft recognises and values the importance of education for young people to provide them with an academic foundation for their future career prospects as well to help them develop appropriate peer socialisation.

Each young person placed at Oxcroft will receive an educational provision that is based on their individual educational needs. If it is possible and in the young person's best interests, we will support him or her to maintain the educational provision he or she is in at the time of accommodation.

As a registered provider, Clover Childcare Services Ltd is aware of the difficulties some young people encounter from a disrupted education. To this end, the company has registered its own educational provision, The Stables Independent School, on site at The Old Rectory. Oxcroft will work in partnership with The Stables Independent School to provide flexible and creative responses to educating young people in key stages 1 and 2. Once the young people reach 14, we will work closely with the Education Department to find the most appropriate provision for the young people to undertake their GCSE qualifications and then to move on to higher education, whether that be college or an apprenticeship.

The curriculum content for each young person is tailored according to his or her ability and availability to engage in structured education or training. This approach includes combining local services and resources with informal social learning opportunities. Integrated packages of educational support can include the following:

• Access to mainstream school, full or part-time

- Independent School
- Alternative Educational Provision
- Specialist school projects
- Home tutoring
- Work experience placements
- Pupil Referral Units
- One to one time, engaging in activities
- Informal, social learning activities

Staff at Oxcroft will support young people in any new educational placements whilst they develop the confidence to establish themselves and will recognise and celebrate the educational achievements of young people in their respective learning environments.

Enjoyment and Achievement

The arrangements for enabling children to take part in and benefit from a variety of activities that meet their needs and develop and reflect their creative, intellectual, physical and social interests and skills

Staff at Oxcroft believe that recreational activity is an essential component in the social and psychological development of young people. It helps young people gain confidence and develops social skills and awareness. It builds self-esteem and self-efficacy. We also recognise that young people need quiet and relaxed times where they are able to reflect on issues and have the space to work through things.

We have a location and environment that provides access to a wide range of natural resources. In addition the staff team possess a variety of skills and interests which lends itself to maintaining and broadening the recreational and sporting interests of young people living with us.

At the outset of the placement the key-worker will consult each young person about their particular interests. This includes any activities, hobbies or clubs that they attend; any activities previously attended but lapsed or new activities that the young person would like to try. Staff will support and help young people to maintain these interests and where we are able to facilitate them key-workers will schedule them into the young person's daily plan. Oxcroft will supply any necessary equipment to complete the activities.

Health

Details of any healthcare or therapy provided including

- (a) Details of the qualifications and professional supervision of the staff involved in providing any healthcare or therapy; and
- (b) Information about how the effectiveness of any healthcare or therapy provided is measured, the evidence of demonstrating its effectiveness and details of how the information or the evidence is assessed.

a) -Dr Lesley Ashby: Consultant Child Psychiatrist.

Qualifications

GMC Registration number: 2711142: Royal College of Psychiatrist membership: 6001 (consultation basis only)

Experience:

1992-2012- Consultant Child Psychiatrist in the City Community Team at Bethel Child & Family Centre, Norwich.

2008-2012- 4 years' experience as Consultant Child Psychiatrist with the Primary Care Trust LAAC Team

1992-2012-Consultations on attachment presentation to AFFU

Dr Ashby has also completed DDP Level 1 and DDP Level 2 training.

Dr Ben Gurney Smith: Chartered Consultant Clinical Psychologist, assesses, treats and consults to Clover Childcare Services.

Qualifications:

Bachelor of Science in Psychology (2.i) University of College, London Doctorate in Clinical Psychology (awarded) BPS/OU

Trainings/therapy qualifications (selected):

Accredited in Dyadic Developmental Psychotherapy 2016 Membership Number 114 Consultant and Practitioner in Dyadic Developmental Psychotherapy

Presentations:

Ben has presented nationally and internationally on practice and research concerning Dyadic Developmental Psychotherapy.

Professional Membership:

2008-present: Registered with HCPC as Clinical Psychologist: Membership no: PYL05452

Professional affiliations:

DDP Institute (DDPI) board member and Research Coordinator for DDPI (see https://ddpnetwork.org/uk/).

Honorary Senior Lecturer, University of Glasgow (see <u>University of Glasgow</u> <u>Staff List</u>).

Publications (selected and available on request):

Ben has published research, chapters and books on several areas of psychological practice including: mindfulness, cognitive behavioural therapy, needs assessment in secure settings, parenting stress, assessing qualities in prospective foster and adoptive parents, DDP and the application of DDP principles to the practice of mental health.

Experience:

Ben has worked with looked after and adopted children and their families since 1997. He has worked in a number of settings including residential, secure facilities, local authority, CAMHS and third sector.

He established the ATTACH team in Oxford. This is a recognised service of good practice by the British Psychological Society which works with looked after and adopted children.

Currently he is the Clinical Lead at Adoptionplus Adoption Agency, Milton Keynes (see http://www.adoptionplus.co.uk/) which is an Outstanding Provider and is a partner of Proximity Partnership, an Independent Clinical Psychology Practice.

Dan Holdsworth, Senior Practitioner at Clover Lodge provides Theraplay for children who we feel would benefit from this and which they attend with a secure attachment figure form the staff team within the home. Dan is trained in Therplay levels 1 and 2 and is currently working through the intermediate level qualification. He is regularly supervised by a member of the Theraplay institute.

b) Oxcroft provides a therapeutic milieu in which children can receive "therapeutic reparenting" from well trained and supported staff. The therapeutic care provided is consultant-led, using the theoretical basis of Attachment Theory. We meet as a staff group on a regular basis with our Consultant Child Psychiatrist to review the presentation of the children we look after. Using attachment theory, we analyse the young people's attachment behaviours and styles and formulate our practice responses. In this manner, we are able, as a group, to think very similarly about the delivery of our therapeutic care, as well as have a shared understanding about our children.

Dyadic Developmental Psychotherapy (DDP)

Throughout their homes Clover Childcare Services provide a therapeutic milieu which is grounded in a theoretical model of practice supported by training, supervision and consultant led care.

In 2010, Dyadic Developmental Psychotherapy was the model chosen by the Directors of Clover Childcare Services as representing a close fit in the guiding vision of the homes and the implementation of these values within a coherent theoretical model. The story of the implementation of DDP at Clover Childcare has been presented at the 2016 International DDP conference in Glasgow (follow: DDP Conference 2016).

Developed in the context of the recognised effects of maltreatment on children (often referred to as developmental trauma), Dyadic Developmental Psychotherapy (Hughes, 2011)¹ is a relational therapy developed to facilitate the qualities of attachment security between the child and their parents/caregivers. This model applies the frameworks of attachment theory, inter-subjectivity and neurobiology to ameliorate the impact of maltreatment on children citing that a triad of developmental outcomes associated with maltreatment but also common in mental health difficulties are addressed: 1) trust, 2) regulation and 3) reflection are actively addressed in DDP. As determined by the model, this is achieved by using `here and now' intersubjective experiences (the process by which one person communicates their understanding of the other) to facilitate trust and safety, provide emotional regulation, and facilitate a new understanding (reflective function) of why the child has needed to use distrustful, defensive and controlling behaviours in order to keep safe (Hughes, 2011, Hughes, Golding & Hudson, 2015)². The model actively involves the participation of the caregiver as an attachment figure to increase safety and security on which the young person can revisit their unresolved yet formative experiences in relationships.

This model is flexible and can be delivered as a direct intervention as a psychotherapy or through informed practice. The latter has been termed "Dyadic Developmental Practice" and both elements of DDP, psychotherapy and practice, are delivered at Clover Childcare. Clover Childcare has contributed to the development of the practice model in residential care termed `parenting in the moment'. Key elements of the model, conceptualised as the Pyramid of Need (Golding, 2015) are used to guide assessments and monitoring of progress of the young people during their time at Clover Childcare Services.

The adherence to DDP informed practice is monitored and maintained through:

Training in the field of attachment theory and its application to the caregiving task through Navigate training. Training in the model of DDP (termed DDP Levels One and Two) Staff group consultation from Dr Lesley Ashby Consultation from Dr Ben Gurney-Smith

Clover Childcare have also been accepted on the DDP Organisational Practicum (INSERT LINK TO OTHER DOCUMENT) to enhance their application of the model and develop their practice by a recognised process of external scrutiny through the DDP Institute.

¹ Hughes D (2011) Attachment-focused Family Therapy Workbook. New York: WW Norton & Co. ² Hughes, D., Golding, K. S., & Hudson, J. (2015). Dyadic Developmental Psychotherapy (DDP): the development of the theory, practice and research base. *Adoption & Fostering*, *39*(4), 356-365.

In addition to the model, assessments of children are conducted by the Consultant Clinical Psychologist and include: attachment security, cognitive ability, neurodevelopmental needs, psychological well-being and mental health needs. A timeline of a range of tasks before the child is admitted is determined to ensure children are fully assessed by the first year of placement (INSERT LINK TO OTHER DOCUMENT). This includes:

A complied "trauma/nurture timeline" for each child to assist us in understanding the child's formative life experiences.

A psychological assessment.

Administration of standardised questionnaires to baseline and monitor progress.

Alongside the ongoing assessment and intervention process, all children are assessed using standardised questionnaires which are used to monitor progress, evaluate effectiveness of interventions as well as identify need in the child (INSERT LINK TO MEASUREMENT OF CHANGE). This information is used in psychological reports and children's review meetings. The data is also collated to feedback on an annual basis to the Senior Managers and Directors to facilitate an understanding of the grouped progress and needs of the children at any one point across the homes. This information may also inform care planning decisions concerning suitability for children to move into fostering. This policy has been designed and overseen by the Consultant Clinical Psychologist.

Whilst we set our own therapeutic milieu, we accept that the children we look after will have complex and enduring needs and as such may benefit from direct formal therapy as well. We are happy to commission the use of external therapists when these have been recommended by our Consultants, to help the young person access other therapies if we feel this will be beneficial to their emotional and psychological well-being.

Theraplay

At Clover Childcare Services Theraplay is an important part of our core objective to therapeutically re-parent our children. It is a pioneering application of attachment theory to clinically work with children and their parent. For our children the 'parent figure' is selected and will usually be someone who has developed a significant relationship with the child such as their key-worker who cares for them within the home.

Since being developed in the mid-20th Century Theraplay has grown all over the world helping parents/parent-figures to develop their skills in providing playful, engaging, empathic responsiveness and clear guidance for children that can lead to a secure attachment and stable mental health. The use of Theraplay supports our commitment to the use of DDP.

Early on in the child's placement journey with us, the focus on each child will be on building up trust in us and enabling them to view our home as theirs and to feel that it is a safe and secure base where they are loved, nurtured, and feel safe. Theraplay focuses on bringing a child and an attachment figure closer together so that trauma exploration can be safely achieved later.

Theraplay is concerned with developing the preverbal interactions between parent and child. It helps children from traumatic backgrounds and those with attachment disorders to develop their ability to have positive reciprocal interactions and learn the fundamental skills of relationship building which will serve them well throughout their childhood and later in their adult relationships. The goal is to recreate moments of primary inter-subjectivity which are closely related to the attunement between a mother and a new born baby. These are often missed developmental opportunities for children in the care system which, for many, underpin the nature of their difficulties.

The (Marschak Interview Method) MIM assessment is the first part of the therapeutic work which involves the child and an essential part of the process where key-worker and child are observed through a series of activities to gain an insight into how the key-worker manages the four dimensions of Structure, Challenge, Engagement and Nurture. A useful outcome of this therapeutic intervention is that childcare practitioners become more reflective, self-aware and, therefore, skilled in their engagement with our young people.

Life Story Work

Life story work is a therapeutic tool to help children resolve early trauma and form secure attachments with significant adults in their lives.

We feel that life story work is an approach that helps young people to talk and learn about their life experiences with the help of an adult that the child has a positive attachment with. This process does not always have to have an end product as going through the process itself is the most important factor (Ryan and Walker 2007). We also value the process of life story work in the fact that our children will leave our care with a book explaining their life story.

Through our training and experience, we have developed a life story process that develops with the child as they grow as we understand that their understanding of their world will also change. Life story work should not be viewed as static, something that has happened and now is at an end; rather, it should be viewed as being ongoing, as a dynamic and helpful process throughout life.

Due to time restrictions, we understand that social workers do not have the desired time they would wish for to complete effective life story work. With this in mind, compounded with the research that there is a lack of consistency in delivering life story work (e.g. Gallagher and Green 2012) we have devised our own process.

Life story work can be broken down into 3 separate and significant parts which are:

1. The formal sessions that will be completed with the attachment figure under the guidance of the life story lead and Consultant Psychologist. These are written up and put in the 'trauma' section of the child's Therapeutic File. The formal sessions are written up on our keyworking observation sheets which include the principles of DDP and PACE (playfulness, acceptance, curiosity and empathy).

The keyworkers/attachment figures who are delivering lifestory sessions with children will attend formal training, be offered support and receive supervision with the lifestory practice lead. All cases of children that are having lifestory sessions will be taken to The Therapy Forum (an internal meeting between the practice leads of Theraplay, Lifestory and DDP with the Director of Care and Consultant Pychologist) in which the practice lead will receive supervision from The Consultant Psychologist.

- 2. The collation of the relevant information for devising and then presenting the Trauma Nurture Timeline (see timeline to entry document). This includes meeting the social worker and reading the child's files, meeting appropriate family members and collating photos if possible. This all helps to build a picture of the child's past which we then deliver to our Psychiatrist who will offer support, insight and strategies to the staff team based around the principles of DDP. This timeline is delivered to the staff team in the home where the child is living and, if the child attends The Stables Independent School, the timeline will be delivered to their team to ensure consistent approaches should any information or behaviour from a child appear to be linked to any adverse childhood experiences.
- 3. The completion of a lifestory book by the keyworker/attachment figure. This is an ongoing piece of work, regularly updated throughout the child's time with us which they can take away when they leave our care. This book will hopefully assist in the child forming a coherent narrative of their early life.

Kim Golding's pyramid of Need 2007 has become an essential tool for us to use for each individual child when applied to our therapeutic approach. It can be used as an effective reference point of where the child sits on the triangle and whether they are ready for DDP/Theraplay/Lifestory. The decision about which approach is best suited to each individual child will be made by the members of the Therapy Forum and then shared with keyworkers/attachment figures who will be integral to the successful use of the agreed approach.

The arrangements for promoting contact between a child and their family and friends

At Oxcroft we believe in the strength of "the family" and in the importance of strengthening families. We understand how important it is from the child's perspective to see his or her family; equally for family members to keep in touch with their child.

We understand that in some cases it is not always safe, or in the young person's best interest, to promote contact with some family members. However, for most children contact is positive and beneficial. Therefore, where appropriate, staff at Oxcroft encourage, support and promote contact with families as an essential element of the care planning process.

There are several ways in which children and families can maintain and sustain contact with each other. At Oxcroft we monitor contact to ensure that it remains positive and keep a record on the young person's file. We are as flexible as we can be to facilitate visits:

- Families can visit Oxcroft, where we can offer a comfortable private space and refreshments.
- Children can be taken to a neutral venue to enjoy an activity for their contact
- The young person can be taken home for contact
- We can provide an alternative venue for contact

The key aspect of contact is that it is planned, which reduces the risk of contacts being cancelled at short notice and the possible negative impact this would have on young people. Any variation to contact arrangements is made in full consultation with the placing Authority.

In addition to visiting we encourage young people and families to stay in touch with each other by telephone and letter. Children will have access to a private telephone

Children are encouraged to make friends locally as well as retain existing friendships; behaviour permitting these friends will be welcome to visit. Staff will contact the parents of these friends to ensure that they are happy for their child to visit.

It is not our policy to cancel contact as a punishment for difficult behaviour, however where a situation is potentially dangerous i.e. the young person behaving dangerously in a vehicle, staff may need to rearrange contact with the family.

A description of the home's approach to the monitoring and surveillance of children

There are currently no additional monitoring devices in place within the home. It is hoped that a 1:1 staffing ratio during the day and until the children are asleep. Overnight there will be one staff member, on occasions two when felt this is needed, will ensure that children are safe and remain safe, allowing for the fact that the office and staff sleep-in rooms are on the same floor as children's bedrooms. However, we accept that children new to living away from their family may exhibit behaviour such as getting up overnight, trying to wake other young people or running away. Therefore this situation will be closely monitored and should this change due to safeguarding concerns the home's approach to monitoring of young people will be reviewed.

Such review may indicate the need for a buzzer system to be fitted to bedroom doors or the use of baby monitors as an additional means of monitoring during settling time

and overnight, or increased sleeping in staff to two. These are support devices to aid the safety of children and adults. Staff and children understand this. They are not used as alternatives to direct support of children. Should this become necessary young people will be made aware of the use of this equipment. Local Authorities will also be made aware of the use of this equipment and written permission from all placing authorities requested and held on file.

Details of the home's approach to behavioural support, including information about

a) the home's approach to restraint in relation to children; andb) how persons working in the home are trained in restraint and how their competence is assessed.

At Oxcroft we believe that behavioural support is best exercised through investment in, and development of, strong inter-personal relationships with children placed at the Home. These relationships are built on staff having an empathic understanding of the impact of a child's prior experiences and on mutual respect. The emphasis should be on praising the behaviour that we want to see, listening to their views and trying to negotiate solutions to problems together.

Every social environment must have rules to regulate it and we believe that children should have opportunities to contribute to them and thereby gain a sense of ownership of them. We also believe that young people need boundaries in order to feel safe and cared about. Boundaries work best when applied in an understandable, fair and consistent manner. All children challenge the rules of behaviour that are set, this is part of growing up, learning and becoming an independent person. It takes time for a child to understand and learn how to control their behaviour.

When rules are broken within the Home, staff assess whether the actions were intentional (deliberate) or unintentional (accidental or an aspect of the young person's distress).

Where staff assess the young person's behaviour to be unintentional they address the behaviour with the young person as an educational process looking at the triggers for the behaviour, the emotive responses and then offering alternative coping strategies thereby supporting children to develop a better model for selfcontrol.

If however staff assess the behaviour as being intentional the young person can expect a consequence to be put in place. Consequences are not just punishments - they are ways to help young people think and learn about their behaviour and how this affects their relationships. Wherever possible staff address the issue with the young person to negotiate a fair and acceptable solution. Oxcroft believes in the values of 'Restorative Justice' (making amends).

Staff will take time to consider appropriate consequences and will ensure that they have not personalised a situation or acted unnecessarily punitively. Staff are mindful of the prohibited sanctions that seek to hurt, abuse, humiliate or use power over young people.

Staff are aware of non-permissible sanctions outlined in The Children's Homes (England) Regulations 2015, Regulation 19 (1) (2) and have signed statements to pledge compliance with this instruction.

There are occasions when young people, during periods of dysregulation, display challenging behaviours which may need managing with some form of restrictive physical intervention (restraint). Staff at Oxcroft are trained in restrictive physical intervention techniques using Norfolk Steps. This skill will only be used as a last resort if all other diversionary and defusing techniques have proved unsuccessful. Staff members will only use restrictive physical intervention where a child is placing him/herself or others at risk of significant harm or seriously damaging property.

Trained staff will intervene physically until the child's crisis is averted and will release the hold at the earliest opportunity. Staff remain mindful of the psychological effect restraint may have on young people in their care in terms of power issues and past histories. All restraints will be recorded in line with Children's Homes (England) Regulations 2015, Regulation 35 (3). All parties with a legitimate interest in the welfare of the child will be informed of the restraint and all people involved in the situation will be offered a de-brief. The child will also be advised of their right to complain and to whom they can complain about the use of the restraint, should they choose to do so.

Within Clover Childcare Services three staff are qualified Norfolk Steps Trainers who update this qualification annually. They ensure all staff receive training in the use of Norfolk Steps as part of their induction programme, and assess their competence through: regular training updates; the use of Norfolk Steps as a regular item on team meeting agendas and individual supervision. Together with an open and honest debrief following the use of restraint this ensures all staff remain competent in the safe and appropriate use of restrictive physical intervention on young people.

Protection of Children

Safeguarding

All young people looked after at Oxcroft will be respected and protected from harm. They will not be made to feel responsible for reporting allegations of abuse by an adult or young person in the Home, within their family or externally.

Oxcroft has a comprehensive child protection policy and procedure within the Policy and Procedure manual. The Policy has been drawn from the guidance issued by the Local Authority, Norfolk County Council and the Local Safeguarding Children's Partnership. The Policy covers issues including:

- Definitions of abuse.
- Identifying signs and symptoms of abuse.
- Keeping the young person safe.
- Managing allegations
- Who to contact and when.

- Recording.
- Whistle blowing

Also contained within the Policies and Procedures manual is a policy on countering bullying. This policy identifies:

- The types of bullying.
- Signs and symptoms of bullying.
- Managing bullying by staff.
- Managing bullying by other adults
- Recording.

It is part of the induction package for staff working at Oxcroft that they should read and familiarise themselves with all policies and procedures and attend an induction safeguarding training session. It is also part of our mandatory training package that all staff attend an annual safeguarding/child protection training day.. Discussion around policies and procedures is held regularly in supervisions and Team Meetings and the whole document is reviewed annually.

Issues such as child protection matters and bullying are discussed with the young person at regular intervals in key working sessions.

Fire and Emergency Procedures

At Oxcroft we take seriously our responsibilities regarding fire safety. Fire training is an essential part of the induction process for all staff. In line with Regulatory Reform (Fire Safety) Order 2005 safety checks are carried out on the fire system including

- smoke alarms,
- fire extinguishers,
- fire blankets
- emergency lighting etc.

Any faults identified are reported promptly and repaired as a matter of urgency. All this is recorded in the fire logbook.

All staff attend fire marshal training bi-annually and the Quality Assurance Manager and Health and Safety Manager have attended training on preparing fire risk assessments to ensure these are written and reviewed form a sound knowledge base.

On admission each child is shown around the building, the fire drill is explained and the fire exits are pointed out to them. We talk to them regularly about the need to respond quickly and safely to fire alarms, what to do in the case of a fire being discovered and where to assemble in the event of a fire. We also carry out spontaneous evacuation drills at regular intervals, including one 'hours of darkness drill' each year.

Annual visits by external professionals are carried out to assess and advise whether current fire precautions are satisfactory and what needs to be undertaken to upgrade the systems.

Annual checks are also carried out on the boiler and gas supply in the Home. Any faulty equipment is discarded and replaced. All electrical equipment is subject to PAT testing on an annual basis.

Missing From Care

Oxcroft follows the policy set out in Guidance: "Children who run away or go missing from home or care" (D of E January 2014). Since April 2013 police forces have brought in new definitions of 'missing' and 'absent' in relation to children and young people reported as missing to the police. These are:

- Missing: Anyone whose whereabouts cannot be established and where the circumstances are out of character or the context suggests the person may be subject of crime or at risk of harm to themselves or another; and
- Absent: A person is not at a place where they are expected or required to be.

In terms of staff managing unauthorised absences, the following procedure is in place:

- As part of the admissions process a Missing Persons Form will be completed along with a recent photograph of the young person. This has been placed on the young person's file ready for such an eventuality.
- A placement plan identifies the risk management strategy for known behaviour such as absconding. Within this plan the time scale within which the young person must be reported missing is identified. Known addresses where the young person runs to are also identified along with contact numbers for all parties with a legitimate interest in the welfare of the young person.
- The attitude and mood of the young person along with their dress for the day is recorded on the young person's Detailed Record.
- When it is known the young person is absent without permission an immediate search of the premises and surrounding area will be undertaken. Other young people across the homes will be questioned as to the missing young person's whereabouts and local friends in the area will be contacted.
- Staff will consult the prepared documents and follow the agreed plan as to whom to contact and when. This will include The Police (in line with Safer Homes and Young People's Protocol (SHAYPP)) and those with parental responsibility (parent(s) and Children's Services) and the manager on call.

Upon return, staff will check the welfare of the young person. All parties identified will be informed; Police and the young person's social worker will be informed with a

view to visiting the young person. All information will be recorded on the appropriate documentation and sent to the placing authority for the young person within 24hours.

The name and work address of-

(a) the registered provider;

(b) the responsible individual (if one is nominated); and

(c) the registered manager (if one is appointed).

The Registered Provider is:

Clover Childcare Services Ltd The Old Rectory Old Rectory Road Brumstead Norwich NR12 9EU Telephone no: 01692 580050

The Responsible Individual is:

Mr Daniel Knight The Old Rectory Old Rectory Road Brumstead Norwich NR12 9EU **Telephone no: 07876 038599**

The Registered Manager is:

Gemma Bovington 7 Oxcroft, Acle, Norfolk, NR13 3JP **Telephone no:** 07894986301 or 01493 490019

Details of the Management and Staffing Structure of the Home

Oxcroft has a Registered Manager who works predominantly 9-5, an Assistant Team Managers and a team of 6 Therapeutic Residential Children's Practitioners who will work with the young people on a rota basis. It is a mixed gender team. We have up to two members of staff sleeping in at the Home every night.

Arrangements for the Professional Supervision of staff, including staff that provide education or healthcare

All staff working at Oxcroft undertake, a comprehensive induction package that runs for the duration of their probationary period. This covers:

- The Homes' ethos and preferred working style.
- Child Protection
- Fire Safety
- Administration and storage of medicines.
- Administration and recording
- Health and Safety
- Food Hygiene
- Norfolk Steps
- First Aid
- Policies and procedures.
- Safe Care Practices.
- Positive Care
- Complaints and Whistle Blowing Procedure

Training:

In order to meet the objective of developing a multi-skilled, highly trained and experienced staff team Clover Childcare Services Ltd. is committed to training staff to a minimum of Level 3 Diploma for Residential Childcare (England) and is supportive of the concept of continuous staff development. This includes the opportunity for staff to engage in training geared towards therapeutic understanding and skills to use with the direct work with the young people.

In addition to this training, there is in-house training provision to cover essentials of basic residential care practice. We have also developed a programme for discussing the Quality Standards in team meetings throughout the year, a rolling workshop programme to refresh and upskill staff in a number of key areas and a comprehensive CPD plan for all staff.

The Responsible Individual undertakes continuing professional development to ensure he has the skills to supervise the running of the home and organises professional consultation and management supervision for the Registered Manager.

Supervision:

All staff will receive regular supervision from suitably experienced and qualified senior staff which will comprise of fortnightly supervision during the induction period followed by regular supervision as set out in the Regulation 33 (4(b)) of the Children's Homes (England) Regulations 2015. Our aim is for all staff to receive monthly formal supervision with an expectation this should take place at intervals of no more than 6 weeks. Management have an "open door" policy for informal or ad hoc supervision as and when required though this does not replace the need for formal supervision sessions to take place.

The Directors receive monthly supervision from an independent social worker with senior management experience and the Registered Manager is supervised by the Director of Care. All supervision sessions are recorded and signed by both the supervisor and supervisee as a true and accurate record of discussion. Minutes are held on individual HR files with a copy being offered to the supervisee after each session.

Appraisal:

All staff, including managers, will have annual appraisals which will record the level of performance achieved, sets targets for coming year and identify training needs and targets for the year ahead. These will be used as a live document and will inform supervision agendas throughout the year.

Annexe A

Details of the experience and qualifications of staff, including any staff commissioned to provide education in the home

Staff Name	Job Title	Start Date –	Qualification
		Clover	
		Childcare	
		Services	

Kath Laidlaw	Director of Care	2007	Diploma in Social Work Advanced BTEC GNVQ in Health and Social Care ILM certificate in management (NNEB's) Level 5 Diploma in Management and Leadership DDP level 1 and 2
Steve Halliley	Quality Assurance Manager	January 2015	NVQ Level 4 (Care) NVQ Level 4 (LMA) Professional Management Certificate in Health and Social Care DDP Level 1 and 2
Gemma Bovington	Registered Manager	August 2019	Undertaking a Degree in Psychology Level 5 Diploma in Management and Leadership DDP Level 1 and 2 NVQ Level 3
Danny Bunkle	Assistant Team Manager	October 2019	NVQ Level 3 DDP level 1 and 2 Due to study level 5 in leadership in management 2021

Staff Name	Job Title	Start Date – Oxcroft	Qualification
Verity Sinclair	Therapeutic Children's Practitioner	October 2019	NVQ Diploma Level 3 DDP level 1 and 2
Michelle Mckenny	Therapeutic Children's Practitioner	November 2021	NVQ Diploma Level 3 DDP level 1 and 2
Kaytie Dewberry- Pleasance	Therapeutic Children's Practitioner	May 2022	
Yasmin Lowen	Therapeutic Children's Practitioner	May 2022	
Lauren Wright	Therapeutic Children's Practitioner	July 2022	

Other staff from sister homes may be requested to help cover shifts in the home from time to time. Their staffing information can be found on the SoP for The Old Rectory or Clover Lodge.