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1. Our Aims At Shapes Children's Home [\(Schedule 1.1\)](#)

Our aim is to ensure that all children benefit from a service which provides the best quality care and support that enables them to move onto independent living in adult life. We create individualised approaches and interventions to match the needs of each child. A key objective of our service is to ensure that we provide care, support, stability and continuity to children who have experienced a disruptive development and often multiple placements moves. The daily running of our home is based on a structured day with clear routines, firm boundaries and individualised care planning.

2. Our Ethos is Trauma Informed [\(Schedule 1.2\)](#)

At Shapes Children's Home we provide a safe, enjoyable, caring and nurturing environment which ensures that children have every opportunity to reach their full potential and aspirations. We recognise and understand the barriers that children with complex needs face and the historical triggers that may affect their current emotions and behaviour. Within our care planning, we attempt to avoid re-traumatisation which is the re-experiencing of thoughts, feelings or sensations experienced at the time of a traumatic event or circumstance in a person's past. Simply put, we do not permit or promote the use of sanctions or punishments to children in our care. Our ethos is about developing and maintaining relationships to promote change and learning. We also use Positive Behaviour Support which is an evidence and values-based approach to supporting children with behaviour that challenges and impedes their ability to develop relationships and learn adaptive behaviours. Our Positive Behaviour Support Specialists provide input to care planning and intervention where required.

3. Objectives [\(Schedule 1.15\)](#)

We support the achievement of the following objectives:

- Positive relationships
- Emotional resilience and wellbeing
- Good physical health
- A positive self-image and clear identity
- Achieving in education
- Self-care and independence skills
- Personal safety and self-care

4. The children we support and our admissions process. [\(Schedule 1.1, 1.3 \(b\), 1.10 & 1.22\)](#)

We care for and support children with Emotional and Behavioural Difficulties (EBD), between the ages of 10 and 17 years old. Children may remain at the home until their 18th Birthday. We support all genders. Our primary focus is to provide the following services:

- 24-hour care 7 days a week - Emergency placements if required
- Short-term (bridging) and long-term planned placements
- Specialist input from a multi-disciplinary team

With robust care planning and matching, we also support children with the following needs:

- Children who are either under an Education, Health and Care (EHC) plan or are currently undergoing the assessment process.
- Children with High Functioning Autism, Attention Deficit Hyperactivity Disorder, and other forms of neurodiversity.

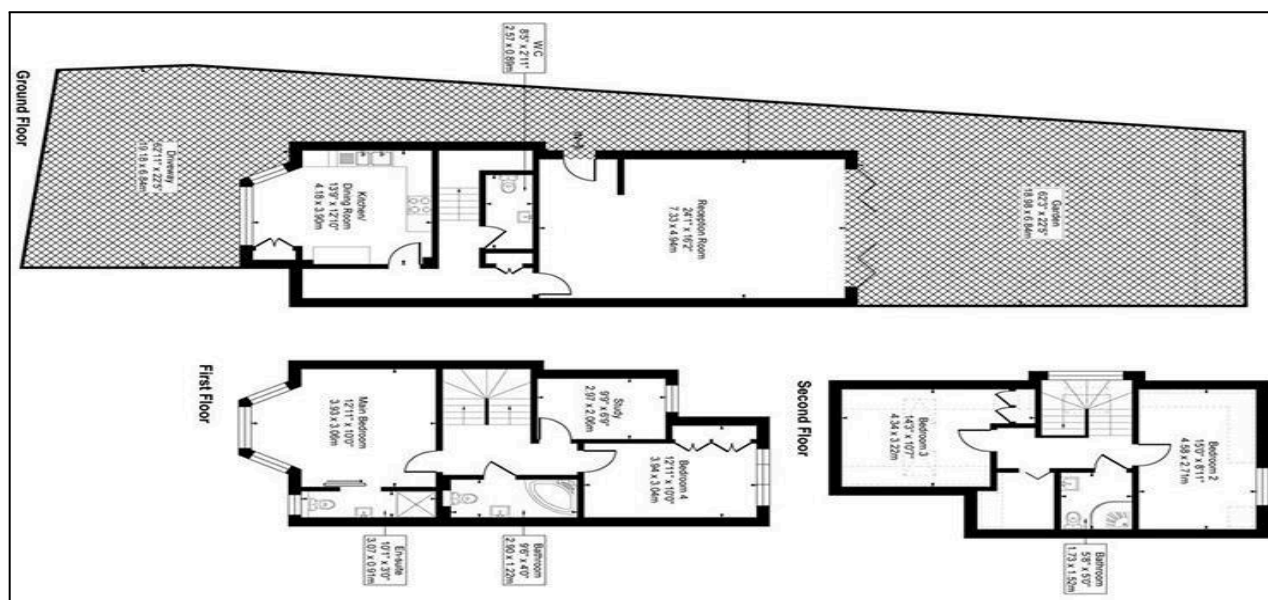
Admissions process in sequence as listed below:

- Referrals received by the Registered Manager
- Screening of referral and brief assessment completed
- Placement matching and impact assessment completed
- Offer of a placement
- Expectations of Placing Authority to provide information
- Transition support/visits planned
- Placement Planning Meeting
- Allocation of Key Worker

The home can accommodate emergency same-day referrals if the child is assessed to have the needs as set out in the Statement of Purpose. The acceptance of an emergency referral must be authorised by the Registered Manager to ensure that the home is equipped to meet these needs. We will always endeavour to gain as much information as possible. A Placement Planning Meeting usually takes place within 72 hours of admission. In the event we assess that we are not able to meet the needs of a child, we will support a smooth and positive transition from our service, by working collaboratively, sharing information and where possible advising what type of alternative provision is likely to be most suitable based on information gathered.

5. Location and Accommodation [\(Schedule 1.3 \(a\) & \(c\) & 1.4\)](#)

The residence features three levels, three bedrooms, fifteen windows, one ground floor toilet, and two bathrooms equipped with toilets and an office where staff conduct sleeping duties. The ground floor and back porch is easily accessible by a wheelchair. The speed limit on the street is 20 miles an hour. Shapes Children's Home is situated in the borough of Barnet, located in north London. This neighbourhood is predominantly made up of residential properties and is recognised as a vibrant multicultural community. It is a favoured location for families and young professionals alike, thanks to its close proximity to central London and a variety of local amenities. The Royal Air Force Museum is nearby which boasts a vast collection of aircraft and aviation-related artifacts and is a key attraction for aviation enthusiasts and history lovers. The area offers numerous local amenities, including shops, restaurants, and cafes. Hendon High Street is a minute walk from the home. It features a diverse selection of retail stores, supermarkets, dining options, and coffee shops. Additionally, the area is well-served by public transportation, with multiple bus routes and easy access to Hendon Central Underground Station and Thameslink Railway stations, facilitating travel to central London.



6. Supporting Cultural, Linguistic and Religious Needs [\(Schedule 1.5\)](#)

At Shapes Children's Home, we embrace the rich tapestry of cultures, ethnic identities, and traditions. Our staff deeply values diversity and is dedicated to fostering each child's racial, ethnic, and cultural identity. As part of the admission process, we gather information about the religious and cultural backgrounds of all children. We strive to uphold each child's religious practices and encourage their participation in cultural or linguistic activities, which are integral to their individualised Care Plan. We actively promote engagement in activities that celebrate their diverse backgrounds in terms of race, culture, religion, language, and abilities. All staff members receive training in Equality and Diversity to ensure the promotion of rights, choices, beliefs, and traditions within the home.

7. Equality and Diversity Practice [\(Schedule 1.9\)](#)

Shapes Children's Home is committed to treating all individuals fairly, with dignity and respect, while valuing their unique differences in accordance with the protected characteristics outlined in the UK's Equality Act 2010 <https://www.gov.uk/guidance/equality-act-2010-guidance>. We will ensure each child is:

- Provided with appropriate, relevant, and accessible activities
- Provided with a protective, supportive, and welcoming environment
- Encouraged to foster awareness about diversity and equality issues
- Encouraged to develop and be proud of their own identity
- Supported when learning from mistakes
- Supported to become comfortable with difference
- Confidentially engaged in a dialogue around issues of bias and discrimination

In our environment, we uphold the principles of respect and dignity for all individuals. Any occurrence

that is viewed as racist by the victim or any observer will be documented and addressed in accordance with our policies (such as those related to bullying) or through the appropriate legal channels (e.g police action). [REDACTED] Deputy Home Manager, can be reached at [REDACTED] or on mobile at [REDACTED] and serves as the equality and diversity lead for the home.

8. Education [\(Schedule 1.10 & 1.12\)](#)

All children are expected to be in full-time education or engage in work or training opportunities. Our daily routine promotes attending education/work or training as being the norm. We take an active interest in our children's education; we assist them with homework and incorporate attendance into our reward system, especially when a child is struggling to attend education. We promptly work with their education provision to address any issues that the child is facing, preferably on the same day. Parents and other relevant parties are kept informed about the child's progress, through reports sent to the social worker and presented at review meetings. For children post-16 years, access to appropriate work experience, Life Skills, Pathway Plans, college courses or work-based learning (such as apprenticeships) will be sought. When children are not enrolled in full-time education we provide alternative education via home tutoring commissioned by each Local Authority.

9. Children's Views, Wishes and Feelings [\(Schedule 1.8 & 1.9\)](#)

We gather children's wishes and feelings through the following means :

- Placement Planning Meetings
- Individual Support Plans
- Looked After Children's Reviews
- Children's Home Meetings
- 1:1 Key Working Sessions
- Independent Visitor (Regulation 44 Visits)
- Naturally through daily conversations around day-to-day decisions
- Children's Questionnaires

10. Children's Health and Wellbeing [\(Schedule 1.14\)](#)

At Shapes Children's Home, daily basic health needs are met through a clean living environment, support in planning nutritional meals which are appropriate to the child's dietary needs, religious, cultural and personal wishes, and positive working practices which encourage healthy eating.

Primary health needs are met by all the children being registered with local GPs, and being encouraged to visit the dentist & opticians for regular checks.

We will try to facilitate children being registered with a doctor of their choice or to maintain their last GP/dentist/optician if this is appropriate and within the practice catchments area.

Care plans contain the following information:

- The name of the general medical practitioner with whom the child is a registered patient, the address of the premises at which the child's primary medical services are usually provided, and the name and address of the child's registered dental practitioner.
- Details of any accident or serious illness involving the child while accommodated in the home.

- Details of any immunisation, allergy, or medical examination of the child and of any medical or dental need or treatment of the child.
- Details of any health examination or developmental test conducted with respect to the child at, or in connection with, the child's school.

Details of any medicines kept for the child in the home, including details of:

- any medicines which the child is permitted to self-administer
- the administration of any medicine to the child
- Any special dietary or health needs of the child.
- How our Positive Behaviour Support Specialist will input their care.

11. Children's Rights

The Children's Guide is provided to every child at Shapes Children's Home. It contains essential information regarding their rights, along with contact information for their social worker, Ofsted, advocacy services, and the office of the Children's Commissioner for England. Children can access their records at any time they request and will receive that in any format they request. [REDACTED], Director of HR Finance and Infrastructure, is the Designated Information Officer for the home and can be reached at [REDACTED] or via mobile at [REDACTED].

12. Enjoyment and Achievement [\(Schedule 1.13\)](#)

At Shapes Children's Home, we understand that our environment can provide children with the invaluable opportunity to expand their experiences, interests, and hobbies. To promote this, in conjunction with local facilities, we have an activity planner which enables an abundant range of activities and clubs to be accessed daily. In addition, key workers will always endeavour to access further opportunities, such as community clubs and links with other services, in line with their key child's interests. Adults will proactively support full access to appropriate recreational and leisure facilities for all children. All such activities will need (where appropriate) parental and/or social worker consent, augmented by the completion of risk assessments and with a firm regard for any identified vulnerabilities or situations with the potential to cause harm if not managed appropriately. The following recreational and sporting activities may include for example (list not exhaustive):

- Swimming ([Hendon Leisure Centre](#))
- Trips and visits to cultural centres, such as museums and art galleries
- Football and other sports events
- Boxing ([Crickle Boxing Gym](#))
- Gym activities ([Hendon Leisure Centre](#))
- Attendance at Gaming facilities/events

An activity budget guarantees the availability of sufficient funds while prioritising the safety of the children during activities. This framework allows for spontaneous engagement in activities as needed. We encourage visits from friends and family, fostering the development of relationships beyond the home environment. With proper planning and collaboration with the staff team, we can invite visitors to join us for meals. We recognise the significance of nurturing friendships that positively affect children, as these relationships can enhance their self-worth and influence their future social interactions. When safe and suitable, children have access to computers for both

recreational and educational purposes, whether in their rooms or shared spaces. All computer usage is monitored, ensuring a secure environment for all activities.

13. Contact with family and friends [\(Schedule 1.15\)](#)

The home implements contact agreements so that important relationships can be maintained. We welcome families and friends and can accommodate planned visits. Any visitors must be approved by the Registered Manager before they take place.

14. Behaviour Management [\(Schedule 1.7, 1.14 & 1.17\)](#)

These are the core components of how we support children with behaviour that challenges :

- **PBS** - Positive behaviour is promoted, reinforced and acknowledged by the home.
- **Dignity** - Children are respected and involved in devising their own individualised PBS plans.
- **Care Planning** - We implement Trauma Informed Care. Sanctions and punishments are not permitted as a form of discipline or control. We understand historical events influence human behaviour.
- **Accountability** - Positive Behaviour Support Plans and Data are shared with the children and stakeholders to ensure counter-control over their own care. All plans have the oversight of a suitably qualified Behaviour Analyst.
- **Consent** - PBS plans are co-signed by the child, parent and Local Authority.
- **Negative behaviours** - These are dealt with fairly and proportionately by staff via key working sessions.
- **Constructive approach** - We do not expect children to be 'well-behaved' all the time. Support and reactive strategies are available to assist child development.
- **Evidence-based practice** - The home collates and records behavioural data. Data-based decision-making informs successful care, risk and intervention planning. Children are protected when decisions are based on evidence and not perception.
- **Restrictions and Control** - Restraint is the very last resort. Any interventions which are severely restrictive or require severe levels of supervision will be subject to a Deprivation of Liberty Order or Emergency Authorisation to do so. **Deprivation of Liberty orders are permissible and not mandatory in their application.** Staff can make a dynamic risk assessment to manage challenging behaviour with a less intrusive approach which is in the child's best interests. When a restraint takes place the social worker and parent are informed.
- **Training** - All staff receive training in Positive Behaviour Supports, Trauma Informed Care, and de-escalation and restraint training in one of the following:
 - Training is refreshed annually. In addition, staff receive group and individual supervision when required regarding de-escalation and physical intervention and positive behaviour support from [REDACTED]
[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]
[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]
[REDACTED] Both consultants are Registered Board Certified Behaviour Analysts with UKSABA and the UK Professionals Standards Authority).
 - All staff receive No Fear Physical Intervention and De-escalation Training. This training aligns with the Restraint Reduction Network (RRN) standards and helps foster a safer, more consistent approach to managing challenging behaviours. Having all staff attend the same training from the same provider ensures a unified approach, where every

team member has the same understanding of intervention methods, de-escalation techniques, and ethical considerations.

- Consistent training allows for seamless care across shifts and between staff, reducing inconsistencies that can confuse or upset children. All staff develop a shared language and approach, which enhances communication and coordination in challenging situations. Implementing a unified, compassionate, and non-fear-based approach to physical intervention demonstrates a strong commitment to the safety, dignity, and well-being of both children and staff. This strategy aligns with ethical best practices and supports a positive environment in the home.
- **Pledge** - The Home has made a pledge to the Restraint Reduction Network and applies their guiding principles to minimise the use of restraint within the home.

The children cared for at Shapes Children's Home may display behaviour that is viewed as inappropriate (challenging behaviour) as they may often lack the understanding of a given situation. They may be unable to effectively communicate their needs and may not know what is expected of them or what they're supposed to do next. We believe best practice is good role modelling. Rules are much easier to follow when they have had the opportunity to contribute to them and when the boundaries are clear and consistent. Sanctions are not used in the home. The use of sanctions could have a negative emotional impact on a child. At Shapes Children's Home we promote the use of positive reinforcement. The staff team is fully trained in de-escalation techniques.

Physical interventions are only used as a last resort and to ensure the child's own safety or that of another. When certain behaviours presented by a child are likely to break down relationships we work with the child in a restorative way to ensure a positive rapport remains in place with the child and their relationship with that person. Simply talking things through and listening can be enough. Each child in placement will have a positive behaviour support plan developed in partnership with them if required. Anyone may request a copy of the Home's Behaviour Management Policy from [REDACTED] Responsible Individual, [REDACTED]



15. Complaints [\(Schedule 1.6\)](#)

You can make a complaint to any member of the staff of Shapes Children's Home. You will receive a confirmation letter confirming receipt of your complaint within 24 hours. You will receive the outcome of your complaint within 14 days. If further time is required, you will receive a letter confirming the extended period required to resolve the complaint. If you feel your complaint was not resolved then you may appeal to the Responsible Individual, [REDACTED]. A copy of the outcome of your complaint will be placed on your care records with us. All complaints will be shared with the independent visitor and the OFSTED Inspector for the home. Any complaints relating to you being harmed by a member of staff will be referred to your social worker and the Local Area Designated Officer. If a child, advocate or staff is dissatisfied with the outcome of the complaint then they may complain to OFSTED at the address below. See complaints policy for further information.

Ofsted
Piccadilly
Gate Store

Street
Manchester
M1 2WD
Tel: 0300 123 1231
enquiries@ofsted.gov.uk

If staff or other professionals wish to file a complaint or whistleblow to OFSTED, these are the following details to do so:

- Call whistleblowing hotline on 0300 1233155 (8am to 6pm, Monday to Friday)
- Email whistleblowing@ofsted.gov.uk
- Write to: WBHL, Ofsted, Piccadilly Gate, Store Street, Manchester, M1 2WD

16. Protection of Children [\(Schedule 1.7\)](#)

All staff undergo safeguarding training focused on both children and staff. Additionally, staff members receive specialised training in Child Sexual Exploitation (CSE) and other relevant safeguarding topics. Children are also educated on safeguarding through themed key working sessions. Safeguarding encompasses not only the protection of children from intentional harm but also addresses a broad spectrum of issues related to their welfare, health, and safety. The Registered Manager, Responsible Individual and the DSL serve as the Designated Safeguarding Leads for the home. In the absence of the Registered Manager, the Responsible Individual is available to address any safeguarding concerns. Our safeguarding policies are readily accessible online for all staff and can be found in their email signatures for convenience. Both children and staff can request the home's safeguarding policy and related documents at any time. The home also maintains a distinct whistleblowing policy. Children receive key working sessions on safeguarding during their initial induction. The following policies are established at the home: Missing Persons, Managing Allegations Against staff and Volunteers, Anti-Bullying, E-Safety, Child Sexual Exploitation (CSE), Safeguarding Children from Radicalisation and Extremism, Female Genital Mutilation, Gang Involvement, Medication Management, Deprivation of Liberty, Code of Conduct for Staff and Volunteers, Complaints, Whistleblowing, Supervision, and Lone Working. Anyone wishing to obtain a copy of the home's safeguarding policy can contact the Responsible Individual at [REDACTED] or via email at [REDACTED]. [REDACTED] is the home's Designated Safeguarding Lead (DSL) can be contacted via email at [REDACTED], she is a registered Social Worker with Social Work England. Her registration number is [REDACTED]. She can be contacted on [REDACTED].

17. Recording and Reporting Timelines of the Home [\(Schedule 1.16\)](#)

Daily logs will be sent every 15 days to Local Authorities at their request. Behavioural Incident reports will be sent within 7 days when such reports are deemed behavioural by the Registered Manager. Restraint Reports are sent within 49 hours. Serious events as defined by OFSTED will be notified to the Local Authority and OFSTED within 24 hours ([Tell Ofsted about a serious incident in a children's home or secure children's home - GOV.UK](#))

18. Supervision of Children [\(Schedule 1.16\)](#)

In the planning phase, we will evaluate the individual needs of each child alongside the expectations of parents and local authorities to determine the appropriate level of support required for safety. This may involve adjusting staff-to-child ratios during specific times to ensure adequate supervision.

However, we aim to avoid maintaining high levels of supervision unless absolutely necessary. Throughout the night, there will always be two staff members on duty. Staffing arrangements will take into account the children's needs regarding privacy, normalization, and safety.

For security purposes, we have a 24-hour CCTV system that monitors the exterior of the home, including the front, side, and rear areas. Recordings are stored on both a hard drive and in cloud storage. Only the senior management team (e.g. Registered Manager) can download and access the videos. This data is retained for a period of 30 days. Any concerns regarding CCTV raised by children or young people will be addressed to minimise potential privacy impacts, and regular reviews will be conducted to ensure its continued justification. Signage is displayed to inform the public about the CCTV usage. Access to recorded footage is restricted to the Registered Manager. Children will be consulted on a yearly basis on the need for CCTV externally at the home.

For safety and security, the front and back doors of the home are locked at 9:00 PM and unlocked at 8:00 AM daily. Children may request to leave the home at any time by asking staff to unlock the door, as this procedure is not intended to restrict their freedom.

19. Risk Assessments

Shapes Children's Home has individual risk assessments which record risk reduction strategies for general practices or hazards which potentially pose a risk to all children, and visitors. Some risk assessments are formulated before a child or child is admitted into the home, based on referral information gathered which may have identified this need. Other assessments are conducted on an ongoing basis. We recognise the learning and development process around this and that children require the opportunity to take measured risks, as part of growing up and developing independence.

20. Advocacy

It is part of our ethos to ensure that children are supported to raise concerns, whether this is about our service or any other aspect of the care they receive. We communicate their right to do so, and how they can be supported if needed, through the use of an Independent Advocate, who we will contact at their request. We also inform children of their entitlement to an Independent Advocate provided by their placing authority, to advise them and ensure they have the support needed to express their views, wishes and feelings about their care and lives. Further information is detailed in the home's Children's Guide. The local children's advocacy service is [coramVoice](#).

21. Recruitment, Vetting, Training and Supervision (Schedule 1.19)

Shapes Children's Home undertakes safer recruitment, vetting and screening procedures for all employees in line with The Children's Homes (England) Regulations 2015. The Manager and Deputy Manager are trained in safer recruitment to ensure all staff are appropriately interviewed and screened. No staff will undertake 'regulated activity' unless this process has been satisfactorily completed. Following a successful recruitment, selection, and interview process and the completion of vetting procedures, all staff will be required to complete an induction, during which time they will be regularly supervised and appraised by senior staff as per the home's workforce development plan. From this process, a development programme is implemented that is monitored by the Home/Registered Manager and through line management supervision which occurs on a regular

basis. This is dependent on the staff members working hours and availability. But for a permanent staff member (full time) supervision will take place no less than 4 times yearly. An annual supervision appraisal is also undertaken during which the performance of staff is reviewed, and further support and improvement identified to promote continuous professional development.

22. Training [\(Schedule 1.17 & 1.19\)](#)

We implement an induction and assessment phase that is not constrained by time limits. But it is expected staff will complete their induction within 6 months of starting in post. Our approach includes reflective supervision and a structured performance review system. Training needs are determined based on national standards, supervision, and performance evaluations, covering areas such as first aid, food hygiene, de-escalation and physical intervention techniques, trauma-informed care, positive behaviour support, and specialised safeguarding courses. All necessary training is completed both prior to and following the commencement of their roles, ensuring that all staff possess the essential knowledge and skills. All staff in the home are required to hold at least a Level 3 qualification in Child Care. If they do not possess this qualification at the onset of their employment, they must achieve it within 18 months. Currently, staff members are enrolled in Level 3 and Level 5 courses.

23. Leadership and Management [\(Schedule 1.21\)](#)

At Shapes Children's Home we ensure that we have a range of different skills, experiences and diversity within our staff team which includes aiming to have good balance between male and female staff to ensure we can provide appropriate role modelling and gender-specific support in a safe and dignified way, such as personal care. To demonstrate our commitment to this we will keep under review the needs of the children against the qualities of the staff team, taking any necessary action in line with our Equality Policy.

24. Responsible Individual [\(Schedule 1.18\)](#)

██████████ is currently the Director of Services for SSV Shapes Ltd. He has over 20 years' experience in Health, Education and Social Care. He is a registered Social Worker with Social Work England ██████████. He has significant management experience working in children's services as a Team Manager (MASH, Neighbourhood Safeguarding and Children's Disabilities), Responsible Individual and also as a Local Area Designated Officer (LADO).

25. Registered Manager [\(Schedule 1.18\)](#)

██████████ currently serves as the Registered Manager at Shapes Children's Home, several years of management experience managing residential care as a Deputy Manager. Ronald is currently studying for his Level 5 Diploma in Health and Social Care.

26. Director

██████████, Director of Shapes Children's Home has a bachelor's degree in Business Information and Systems and management. He has been the Director of Total Care Semi-Independent living for young people since 2018. In addition, he has 11 years key working / mentoring experience working with children with global developmental delay and autism. He also has 10 years experience as C-suite executive and founder of multiple businesses.

27. Regulation 44 Independent Visitor

[REDACTED]
[REDACTED]
[REDACTED]

28. Address of the Home [\(Schedule 1.18\)](#)

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

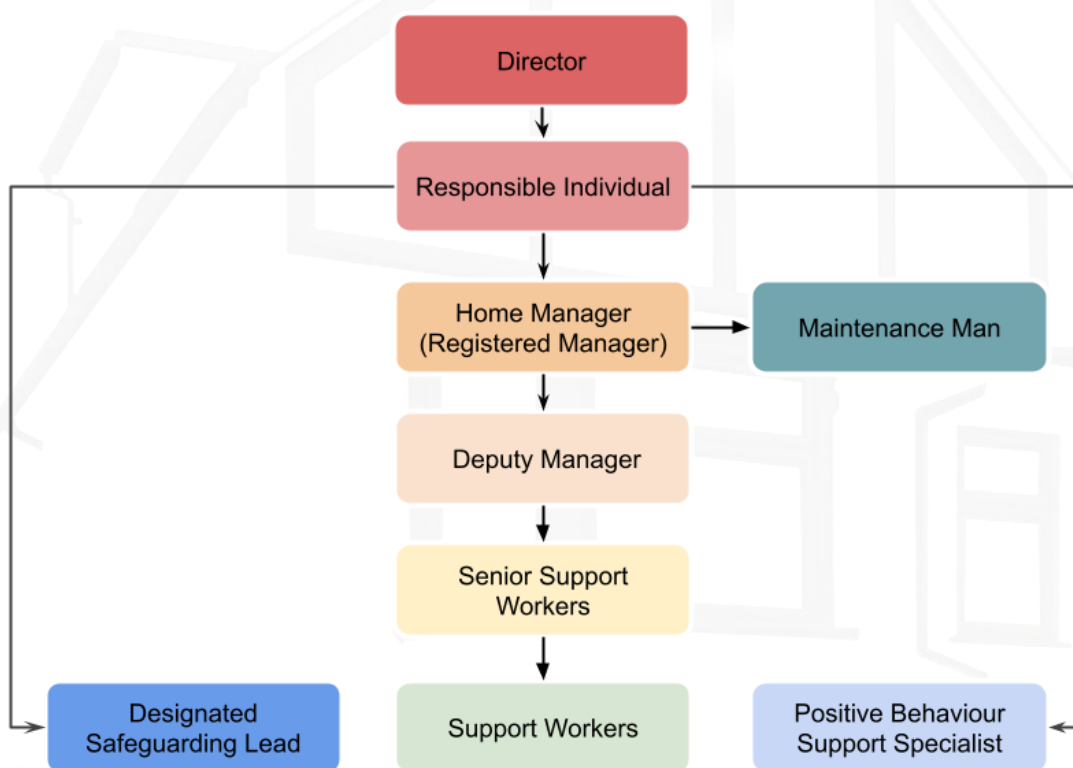
29. Address and Contact details of Head Office

SSV SHAPES LTD
First Floor 85 Great Portland Street,
Marylebone, London,
United Kingdom, W1W 7LT
management@safe-support.co.uk
01379844059

30. Staff and qualifications [\(Schedule 1.20\)](#)

| | Name | Title | Qualifications | Years working in social care |
|-----|------------|--------------------|--|------------------------------|
| 1. | [REDACTED] | Registered Manager | Health and Social Care Level 5 Qualified | 5 |
| 2. | [REDACTED] | Support Manager | Level 5 HND BTEC - Health and Social Care Management | 15 |
| 3. | [REDACTED] | Deputy Manager | Children, Young People & Families Manager Level 5 (enrolled) | 3 |
| 4. | [REDACTED] | Deputy Manager | Health and Social Care Level 5 (enrolled) | 3 |
| 5. | [REDACTED] | Sr. Support Worker | Health and Social Care Level 5 (enrolled) | 1 |
| 6. | [REDACTED] | Sr. Support Worker | Health and Social Care Level 5 (enrolled) | 1 |
| 7. | [REDACTED] | Sr. Support Worker | Health and Social Care Level 5 (enrolled) | 4 |
| 8. | [REDACTED] | Sr. Support Worker | Health and Social Care Level 5 Qualified | 2 |
| 9. | [REDACTED] | Support Worker | Health and Social Care Level 3 Qualified | 2 |
| 10. | [REDACTED] | Support Worker | BTEC Level 3 - Music Technology | 0 |
| 11. | [REDACTED] | Support Worker | Health and Social Care Level 5 (enrolled) | 6 |

| | | | | |
|-----|--|----------------|---|---|
| 12. | | Support Worker | Level 4 Health and Social Care Children young people family practitioner (Enrolled) | 0 |
| 13. | | Support Worker | Diploma in Fashion Marketing & Management | 4 |
| 14. | | Support Worker | Bachelor of Music | 0 |
| 15. | | Support Worker | NCFE Cache Level 2 Diploma for the early years practitioner | 1 |
| 16. | | Support Worker | Health and Social Care Level 3 (enrolled) | 2 |
| 17. | | Support Worker | Health and Social Care Level 3 Qualified | 2 |
| 18. | | Support Worker | Master of Science with Commendation in Management Diploma | 2 |



31. Schedule 1 - Children's Home Regulations 2015 References

Matters to be included in the Statement of Purpose

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.

