



Residential Family Assessment Centres

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Statement of Purpose

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Established in Accordance With Requirements of Ofsted

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CARE 2 SHARE – About This Document

This document will aim to provide all the information required in Schedule 1 to the Residential Family Centres Regulations and in accordance with The National Minimum Standards in relation to Residential Family Assessment Centres.

The statement will include details of the assessment model in line with the Framework for Assessment of Children in Need and their Families, our ethos and philosophy, a description of the centre and its services.

This document will be made available to all service users and centre staff will be fully conversant with the contents and will be expected to practice in accordance.

This document is available through alternative methods of communication when required and requested.



CARE 2 SHARE – Introduction

What Is This Document?

The Care Standards Act 2000 requires that all Residential Family Centres have a Statement of Purpose. This is the Statement of Purpose for Care 2 Share Residential Family Assessment Centres.

Who Decides What Is In It?

The Care Standards Act sets out all of the areas that the Statement of Purpose must cover.

Who Should Know What This Statement Says?

It is very important that all members of staff are familiar with the contents of this Statement of Purpose. Where there are specific procedures contained within this statement, Inspectors from the Ofsted will require to see evidence that the procedures are being followed.

What Happens If Procedures In This Statement Are Not Followed?

The Registered Manager of the Units and Responsible Provider are potentially subject to Enforcement Action under the Act where inspectors find that any areas covered by this Statement of Purpose have been breached or where the Units cannot provide sufficient evidence that procedures are being followed.

Who Can See This Document?

This Statement of Purpose must be made available to any residing family member to all members of staff, any Social Worker of a family resident at the Units and to any representative of Ofsted.

Residents' Handbook

Resident families must be given a summary of the Statement of Purpose. This can be found in the form of a Resident's handbook.

Review of the Statement of Purpose.

The statement of purpose will be reviewed annually.



NAME AND ADDRESS OF REGISTERED PROVIDER

Residential Family Assessment Centres

Registered Managers:	Sandra Reynolds (Walthamstow) Samantha Jay (Leytonstone)
Registered Provider:	Mehnaaz Nina Chaudhary 55 Gordon Road South Woodford London E18 1DW
Responsible Body:	Ofsted
Current Ofsted Rating:	No 19 – ‘Good’ (Date of Last Inspection- August 2015) Wallwood Rd – ‘Good’ (Date of Last Inspection- August 2015)



ETHOS AND PHILOSOPHY

WORKING IN PARTNERSHIP

GUIDING PRINCIPLES AND PHILOSOPHY



CARE 2 SHARE – Working in Partnership

Care 2 Share is an organisation formed by a group of experienced childcare professionals to provide residential services for families and their children.

Care 2 Share has been caring for children in the community for the past ten years. We have two residential children's homes, a number of supported lodging houses/flats and a team of outreach workers who work directly with families to support and maintain children within their families. We have an excellent track record of providing high quality care to children and their families. All our registered Units have been judged by Ofsted to be 'Outstanding' or 'Good'.

Care 2 Share works with people who experience disadvantages associated with a range of special needs, in particular, learning disabilities and mental health conditions.

Care 2 Share's first Residential Family Centre based in Walthamstow has been registered since May 2006. In the recent Ofsted inspection in August 2015 this was judged to be 'Good'.

Care 2 Share has opened a second residential family centre based in Wallwood Road Leytonstone. This unit provides residential parenting assessments for five families. We are therefore now able to offer eleven placements across the two residential centres. At the inspection in August the Leytonstone Residential Unit was rated as being 'Good' with the quality of assessments being judged as being 'Outstanding'.

Over the years we have built experience and a good reputation in working with parents with mild to moderate learning difficulties. Through this work we have identified a need to offer a specific provision for parents with learning difficulties identifying a gap in the London and surrounding areas. As such we now able to offer specialist-parenting assessments where one or both parents have a learning difficulty or disability. Our work supports parents to develop their skills and confidence, to make choices about how to live their lives and improves their opportunities to engage with and parent their children and contribute to the community.

Due to the increase in beds, we are now able to offer a wider range of assessments and support packages to parents with children.

We offer full residential assessments to parents with a multitude of needs including working with offenders including those found guilty of harming and neglecting children, drug and alcohol dependency, mental health, domestic violence, 'looked after' parents, young teenage parents and parents with learning difficulties.

In addition, expectant mothers can undergo a pre-birth assessment as part of the parenting assessment, enabling to mother to have support to prepare for the birth and become familiar with the setting before a parenting assessment commences post birth.

We are also able to carry out community based parenting assessments whereby parents attend the units on a daily basis with their children for assessment but do not reside at the units. This can include pre-birth assessments for parents who require an assessment to make recommendations of the next steps post a mother giving birth.

We also offer residential supported living placements with monitoring and supervision offering a range of packages from low, medium to high support. Such packages of monitoring and support compare favourably to mother and baby foster placements both in terms of costs and flexibility. In our experience parents prefer the independence of residential support to the intimacy of foster placements.

Care 2 Share aims to establish and maintain effective working relationships with Placing Local Authorities, Professionals, Families and any others contributing to a child's care plan in order to work in the 'Best Interests of the Child.

Care 2 Share is committed to working co-operatively with other agencies to ensure comprehensive and co-ordinated services for children and their families are provided.

Care 2 Share adopts the view that families and children in need should be provided with effective and sensitive intervention in a secure and positive environment.

Care 2 Share believes that it is important to identify these needs and through our research and experience we have identified strategies for intervention which could assist statutory bodies to provide resources that are needed within the community we serve.

Encouraging and building positive relationships and providing consistent support will be an essential part of our work at Care 2 Share.

Our emphasis is on working in partnership with Local Authorities, children and families to ensure that the most appropriate packages of care are compiled in order to meet specific needs.

We aim to carry out services based upon the promotion of good practice which will enable us to accommodate the needs of all community groups irrespective of race or religion.



Guiding Principles and Philosophy

Parents, carers, children, their needs, wishes and view are central to the philosophy of Care 2 Share. We focus on positive outcomes, a respect for human rights and for the values of the families themselves. We believe where possible, children are best cared for in their own families. Our aim is to enable and empower the parents/carers and children to be fully involved both in the long term plans for their future and in the day to day activities that foster personal, educational and social development.

Care 2 Share recognises the vulnerability of the families with which it works and acknowledges the reality of the damaging experiences that they may well have experienced. It works to provide families with a nurturing environment in which they can gain confidence and develop their potential with the ultimate aim of them returning to their own family environment.

The standards expected of parents with a disability should be no less and no more than those standards expected of all parents. Each child has the right to a loving, secure family life which recognises and meets their physical, emotional and psychological needs. For parents who have disabilities, achieving this for their children may need additional assistance, support and training.

Our objective is to manage transition and change with the minimum of disruption for the development and growth of the families. We will treat people with dignity and respect and expect the same in return.

The Placing Authority is also an essential partner and Care 2 Share considers it essential that close links are maintained with all key staff within the Authority concerned with the young person's care.

Other partners also have an important influence on the families' welfare and Care 2 Share will inform and involve other agencies such as schools and colleges, recreational and leisure providers wherever relevant and useful to the development of the parents/carers and the children.

Care 2 Share will endeavour to provide an environment which is free from Discrimination in any form, regardless of Race, Culture, Social Status, Religion, Disability, Age or Sexuality. We will encourage and enable the parents/carers and their children to maintain their dignity, freedom of choice and their rights as an individual. We will also facilitate their rights to privacy.

At the heart of the Care 2 Share approach is the UN Charter on the Rights of the Child and the interpretation of this within national legislation: The Children's Act 1989/2004, the Residential Family Centres Regulations and Department of Health NICE Guidelines and Working Together to Safeguard Children.

Mutual Respect

Relationships within the Units should be based upon mutual respect for the rights and responsibilities of others. Members of staff are expected to treat resident families with respect at all times and residents are asked to treat staff members and other residents in the same way.

Anti-Discriminatory Practice and Equal Rights

Great importance is placed on residents and staff treating one another with equal respect regardless of race, cultural background, gender, sexuality, ability or disability. Discriminatory statements made by residents will be challenged. Any members of staff making such comments can expect to be the subject of action under the disciplinary procedures.

Any resident (adult or child) or member of staff who feels that any aspect of the service is in any way discriminatory should complain. Further information on how to do this can be found in the separate procedures on 'How to Complain' and 'Whistle Blowing'.

Working Together in Partnership

Staff are committed to working in partnership with families. Families are consulted and are fully involved in all aspect of their assessment. For example assessment recordings are shared daily with families and families are involved in drawing up their placement plan and programme of work for their stay at the Units.

Feeling at Home

Families should feel able to treat the Units as their home for the short period they are resident here using the facilities available to them as they choose. With this right comes responsibility and individual family members are expected to treat the facilities and equipment with respect.

Encouraging Complaints

The Units welcomes complaints. A principal aim of the complaints procedure is to continually improve the service being provided. Parents and children are encouraged to complain if they are unhappy with any aspect of the service they are receiving. The complaints procedure is detailed on page 111 of this document.



MODELS OF WORK

ASSESSMENT, THERAPY AND EVALUATION

ASSESSMENT FRAMEWORK

ASSESSMENT PROCEDURES

PROCESS OF ASSESSMENT

OBSERVATION METHODS

SUPERVISION AND OBSERVATION

PUTTING PROGRAMMES INTO PRACTICE

DIRECT WORK WITH FAMILIES

PROMOTING SELF-ESTEEM

ANGER MANAGEMENT

DEALING WITH DOMESTIC ABUSE

AWARENESS OF ABUSE

SUBSTANCE MISUSE PROGRAMMES

FAMILY THERAPY



Models of Work: Assessment, Therapy & Evaluation

For parents who have additional emotional and/or psychological needs the need for sensitive and informed assessment and support is paramount. This is seen as being critical to the outcome of any successful placement and each family at Care 2 Share receives a full and thorough assessment and evaluation of their needs. Our emphasis is on identifying difficulties and seeking solutions through skilled intervention.

We believe that for most people with special needs, the task of parenting will be a challenging one. For those clients facing additional disability or psychological/emotional needs, this task is ever more complicated.

For these parents to be able to look after their children, we need to understand that the potential for long-term neglect is ever present. In most cases, this potential may be ameliorated by the successful intervention of services.

Care 2 Share focuses primarily on child-centred practice with particular emphasis on the individual needs of the parents/carers and their children.

Our day-to-day work incorporates elements of behavioural and psychodynamic approaches. These approaches concentrate on the need for us to gain an understanding of the background, childhood and past experiences of the parents/carers and their children in order to gain a better insight of their needs. Exploration of labelling and modelling will also assist us to understand some of the behaviour the families may present.

Our staff team is made up of diverse, experienced and qualified staff from a wide range of backgrounds and relevant skills. Staff are fully trained to work and assess parents with learning difficulties using specialist techniques to communicate and develop the parenting skills of parents with both learning disability and mental health issues.

Not every family is able to care for their children but at Care 2 Share we believe that where concerns exist, every person has the right to have their parenting potential assessed, supported and understood.

We believe that parents referred to Care 2 Share benefit from skilled, sensitive assessment and support from an experienced multi disciplinary team. We do not avoid difficult issues and work in an open and honest manner with parents.

Our emphasis is on identifying difficulties and seeking solutions through skilled intervention. Where solutions cannot be found, then our role is to evidence this in

our practice in order to assist families, Social Services and the Courts to reach accurate, fair decisions that serve the best interests of the children in our care.

Service provision should be viewed in the long term. There are no short, sharp solutions for achieving parenting for people with additional needs.

Staff are trained in solution focus work as well as play and therapeutic techniques. The staff team meet together to share the observations they have made of the family and together a fuller picture of the family is obtained during their stay at Care 2 Share.

This assessment provides the foundation for future work and support needs once they leave the residential family centre.

An individual's progress in the Assessment is constantly evaluated so that the team can take account of changes and note areas that still need further work. Each parent is encouraged to participate in the planning process. We believe parents should have input into the articulation of their goals and as professionals we are committed to helping them achieve those goals.



Assessment Framework

Assessments are tailored to suit the individual circumstances of each family. The assessment structure used is based on the Department of Health Framework for the Assessment of Children in Need and their families. For parents with a learning difficulty or disability, our assessments are for a 12 week duration however a recommendation to extend to 12 weeks may be made if a parent requires additional time to make progress in their parenting capacity. This extension will be made if parents are making positive progress in the assessment and with their own self-care skills.

The staff team acknowledges the evidence base that all parents with learning difficulties will face a challenge in parenting their children. This challenge has the potential to lead to long-term neglect and we support the evidence base that such potential for unintentional neglect may be ameliorated by the successful intervention of services. Our role is to determine the nature of this long-term intervention and to identify the potential for this intervention to enable children to safely, securely and happily remain within their own families.

Where this is not possible, the aim of our work is to ensure that families understand the reasons why their children cannot remain with them. They may of course not agree with these reasons but our belief is that it is vitally important for their future well being that they are enabled to plan their future family life. Where a vulnerable adult is unable to continue to care for their child, we see our assessment role to be to identify their own needs for future support to live successfully within the community alone without their children.

Staff will work with clients in individual and group sessions and undertake structured and informal observations. In identifying key targets for change and monitoring the adult's response, we are able to identify the changes that have been achieved. We identify the specific strategies required to support intervention and review any change we observe in parenting application.

We aim to provide a positive, warm and nurturing environment where families can experience the value of family life, mix alongside other families going through the same process and begin to understand their role in parenting their children. We aim to assess their ability to understand the needs of their children and to begin to meet those needs. Where families have to face difficult issues and choices within their own family life, our team are on hand to work through this process and to assist them in placing the needs of their children first.

Our staff team has many years of experience in supporting parents with additional needs and in working with parents who are vulnerable. Our service is based upon evidence. It is based upon the research data which informs us as to

the parenting difficulties, styles of intervention and possible outcomes for parents with special needs.

Our underlying philosophy is based on a behavioural approach which enables us to work alongside families to look at changing behaviour whilst creating a deeper understanding.

Many of our families will have cognitive difficulties. They will need assistance with learning and a clear understanding of their learning needs and styles will enable us to ensure that the most effective learning takes place in the shortest possible time. Centrally we consider their potential to maintain this new learning throughout the child's minority years and to adapt to the child's changing needs as they grow.

We aim to develop skills in the adult to enable them to live more successfully within the community to care for themselves, to maintain their financial position, to budget, to cook and to maintain a healthy, happy environment both for themselves and their families as they grow. Many of our families will not have enjoyed good extended family support and part of our role is to determine the support that may be required that may otherwise come from an available extended family.

During an average assessment stay of 12-16 weeks, three formal reviews will be held to which the families will be invited. The initial assessment lasts for two weeks and up to five weeks for parents with a learning difficulty in which an in-depth risk assessment is undertaken.

The second stage of assessment lasts 8-10 weeks and is used to teach parents parenting techniques. Staff set weekly targets with the family members which are reviewed each week with the family members. We utilise a style of teaching recording the literature as precision teaching which is accompanied by a rating scale ranging from 1 - Behaviour not present to 5 – Always present. This system enables families to clearly understand the requirements upon them and for staff to understand the support mechanisms to be put in place to enable successful learning to occur.

The third and final stage last 2 to 4 weeks and is offered to parents who have consistently met their weekly targets and where concerning behaviour is in the 1-2 range. This period offers parents the opportunity to evidence their ability to put their newly learnt parenting skills into practice. It also allows staff to identify realistic support packages for parents on leaving the assessment units with their child/ren.

Working with Fathers

Fathers matter hugely to their children's lives. Research shows that if a child has a positive relationship with their father, they are likely to do better at school, be happier, have higher self-esteem and even form better relationships when you're an adult.

All too often fathers get forgotten or sidelined and Care 2 Share wishes to change this. Men are not 'biologically' less suited to caring for children than women. When similarly supported, both sexes develop childcare skills at the same rate (Myers, 1982) though what they learn they can have similarly positive effects on their children and on family functioning. Care 2 Share actively supports children's relationships with their fathers.

Care 2 Share welcomes fathers to be considered as primary carers and offers residential assessments to single fathers and those with a partner. In addition if a father is unable to reside at the unit, we can undertake assessments of fathers through high frequency of supervised contact at Care 2 Share.

Care 2 Share offer placements to fathers who are employed and in consultation with the placing Local Authority will negotiate with a father as to how an assessment of his parenting can be incorporated into his working hours. Care 2 Share will also be flexible in allowing fathers to attend probation, drug counselling appointments and attend a domestic violence programme while residing at Care 2 Share.

Fathers at Care 2 Share are offered the same practical parenting sessions as mothers with fathers being taught to bath a baby, change a nappy, sterilize bottles and make a feed and feed and wind a baby in order that they can develop appropriate child centered routines for their babies.

In addition fathers undertake sessions in understanding the importance of play and stimulation, emotional attachment, understanding childhood illnesses and child development.

As part of an assessment, staff undertake sessions with fathers to assess their ability to safeguard and recognise risks to their children and assess their abilities to take appropriate action to protect their children.

All fathers are allocated a key worker who in conjunction, where necessary, with a male support worker, will identify sessions and activities that will be specifically addressed. A male support worker may be used on an outreach basis from another of the related companies' services as a permanent male member of staff is not currently employed.

When working with fathers, Care 2 Share uses resources and research materials specifically designed for fathers such as those developed by the Family Rights Group, Fatherhood institute, Barnardos, Dads. Info and Dads 2b Resource.

While in placement, all fathers are expected to be enrolled at local Children's Centres and attend the father's group with their child and enroll on the five week parenting course entitled 'Dads are important too' provided by adult education.

As with mothers, while in placement and under assessment, staff will endeavor to meet the individual needs of fathers and if appropriate, work will be undertaken with them on issues of domestic violence using the Freedom Programme and living with the dominator' and undertake work on drug and alcohol misuse in conjunction with Turning Point

Staff will also undertake sessions to develop appropriate life skills including laundering, cleaning, cooking budgeting and general household chores.

If it is not the care plan for a father to be assessed or to join the residential assessment Care 2 Share can facilitate supervised contact between a father and child residing at the unit.

PAMS 4.0 Parenting Assessments

The PAMS assessment (Parent Assessment Manual developed by Dr Sue McGaw, a nationally renowned Clinical Psychologist in the field of working with parents with learning disabilities) covers: child care and development, behaviour management, independent living skills, safety and hygiene, parents' health, relationships and support and the impact of the environment and community on parenting.

Each parenting skill area within a domain is assessed for 'parental knowledge', 'quality of parenting skills' and the frequency of parenting practice. By breaking elements of parenting down into testable components PAMS starts to make an assessment of quality that is evidence-based. After completion, the assessor has a clear visual family profile of functioning that target parenting support needs as well as child protection issues.

Staff members have been trained by Dr Sue McGaw and we now provide PAMS assessments from both Centres.

Where a parent has been noted to have a learning difficulty/disability our approach also incorporates the work of Dr Sue McGaw and we use techniques such as:

- Breaking down tasks into easily identifiable steps
- Demonstrating tasks
- Use of prompt cards/pictorial prompts, symbols, diagrams, digital clocks
- Use of visual aids/video
- Addressing issues on a gradual basis, tackling a few issues at any one time to avoid the parent feeling overwhelmed and inadequate
- Repetition of instruction/input
- Role play of risk, stimulation, care focused scenarios e.g. telephone liaison with the DSS, discussing the child's health/symptoms with a GP
- Increased frequency of verbal feedback
- Visualisation of issues e.g. visual use of materials e.g. 'traffic lights' (green, amber, red) to reflect issues

Observation Using CCTV Cameras

The Centre has installed CCTV cameras which facilitates observations of the family 24 hours during their stay at the family centre. CCTV cameras used at Care 2 Share only record images, not sound. The recordings can be downloaded and used as evidence for the assessment if needed. Residents need to sign their consent for this prior to their admission to the centre. Care 2 Share's residents' guide contains guidance and information on the centres usage of CCTV.

During the initial stages of an assessment period, staff will place baby monitors in the rooms of residents to listen that they are tending to their child during the night time periods. These monitors will only be placed on from 23:00 until 07:30 and their sole purpose is to listen to the child present in the room.

Staff will always download from CCTV, any significant incident such as an injury or incident of concern. The CCTV footage self records over itself after 28 days therefore if a particular incident or footage has not been copied within 28 days of occurring, the footage self deletes.

The initial stage of the assessment involves a 2 to 3 week intensive period of observation. As monitoring during this period is intensive, it is expected that the family will not leave the centre without a member of staff being present.

During this period, information is gathered to establish strengths as well as areas where parents are in need of further support with regards to parenting skills. CCTV footage is often played back to parents to evidence areas of concern i.e. leaving a child unattended on a bed.

Parents and children of appropriate age, are encouraged to communicate any concerns to staff about the impact on their privacy. Staff take these views into account.

Care 2 Share have a written CCTV policy and staff follow the Data Protection Act 1998 when using methods of surveillance as part of a parenting assessment.

Programme of Work

Following the initial observation period of 2-3 weeks, specific areas of parenting are identified and a full programme of work is formulated for the family during their stay at the Units. Families are fully involved in formulating the programme of work and are asked to identify what they consider to be areas of strength as well as areas in need of support. We can then compare 'lists' and agree how to proceed. The aim is to increase skills in areas identified as being detrimental to family functioning and working in an inclusive manner so as not to overwhelm parents.

The team offers advice and practical help to the family through role modelling, using pictorial routines, by repetition and constantly checking by requesting verbal feedback as to parents, understanding of staff advice, guidance and concerns.

This covers, developing knowledge and skills around a range of practical and conceptual issues essential to offering 'good enough' parenting. This period is expected to last 8-10 weeks.

Common areas of work:

- Attachment and Bonding/Emotional Warmth
- Behaviour Management/Setting Boundaries
- A knowledge of Child Development
- Basic Care
- Safety
- Health and Hygiene

These areas are broken down into specific tasks, i.e. 'Bathing' – assessment includes how the parent prepares for the child's bath? Is everything to hand? Is the water temperature checked? Manual handling? Eye contact and emotional warmth? Was the task seen as a chore or did the parent make it an enjoyable experience for both self and child?

In key areas in which support is required, parents are allocated sufficient time to ensure that they are given the level of input required to learn and sustain new skills. To ensure that parents are not overwhelmed by the demands of the programme, the residential team review it weekly. It is important that parents are able to learn and integrate new skills at their own pace in a supportive atmosphere.

If at the end of this period it is clear that parents have not begun to acquire knowledge and skills in parenting, then the Placing Authority will be notified so an early decision can be made regarding the placement ending or an extension being granted.

Further Observation – Final Stage

A further period of observation is used to analyse a parent's ability to translate their newly acquired parenting skills and knowledge into everyday parenting skills. During this period, unit staff refrain from offering advice and guidance unless a child is at risk. If families successfully demonstrate and maintain improvements without continual prompts, they are supported in their return to independent living and a final assessment outlining the family's support needs is provided. This period is expected to last 2-4 weeks.

If at the end of this period it is felt that a further period of assessment at the centre is required before a confident decision regarding the family's ability to live independently is made, then this will be put in writing to the Placing Authority so an early decision can be made.

Outreach/Family Support

Following the successful completion of a residential assessment, given the strong likelihood that a person with a learning difficulty or disability will require support throughout a child's minority years, Care 2 Share can provide a period of outreach/ family support to families returned to independent living.

This additional package provides the opportunity for the Local Authority to continue to monitor the family in the community from staff who have in-depth knowledge of how the family function. While the family benefits from receiving consistent ongoing advice, guidance and support from staff with whom it is hoped they have developed a trustful relationship with. This outreach service provides a further period of assessment on how well families are able to transfer parenting skills learnt in a controlled environment into the home and community context where they are expected to live independently.



Assessment Procedures and Checklist

The questions we ask:

1. Can the parent/s be helped to improve their parenting skills?
2. Is there sufficient acknowledgement that problems in the ability to care have arisen?
3. Does the parent see the need for changes in the parent/child relationship?
4. Is there an ability to accept the help offered?

PARENTS:

Parent's Relationship to Parenting Role:

1. Does parent provide basic essential care?
2. Does parent provide age appropriate emotional care?
3. Does parent encourage development of attachment?
4. What attitude does parent have to tasks of parenting?
5. Does parent accept responsibility for their parenting behaviour?
6. Is child expected to be responsible for their own protection?
7. Does parent acknowledge problems in situation?

Parent's Relationship to Child:

1. What are the parent's feelings towards the child?
2. Does the child empathise with the child?
3. Is the child viewed as a separate person?
4. Are the child's emotional needs given primacy over the parent's desires?

Abilities of the Parent:

1. Problem solving
2. Communication
3. Roles
4. Affective responsiveness
5. Affective involvement
6. Behaviour control

Tasks to Look For:

1. Basic tasks – food and shelter, safety awareness
2. Developmental tasks – life cycle
3. Hazardous tasks – crises

Child's Developmental Pathways:

1. Physical development
2. Attachment
3. Socialisation
4. Moral sense
5. Awareness of inner emotional life
6. Language
7. Intellectual
8. Cognitive

Child's Functioning:

1. Appearance
2. Behaviour
3. Cognitive
4. Emotional
5. Relationships

Family Influences:

1. What awareness and attitude does the parent have regarding their own parenting experiences?
2. Is the parent able to sustain supportive relationship with a partner?
3. Is the child over-involved in the family's discordant relationships?
4. How sensitive is the family to relationship stresses?
5. What is the meaning of the child to the parenting relationship?
6. What is the attitude of the child to his caretaker?

Family Life Cycles Analysis:

1. Transgenerational
2. Developmental momentum
3. Genogram

Areas of Family Life to Observe:

1. Relationships
2. Personal growth
3. System maintenance

External World Influences:

1. What support networks are there?
2. What is the pattern of the parent's relationship with any professionals?
Potential for change:
 1. What is the potential to benefit from therapeutic help?
 2. What responses have there been to previous attempts to help?

Measures:

1. Child's perspective
2. Parent's perspective
3. Parent-Child perspective
4. Whole family perspective
5. Closeness and distance
6. Power hierarchies
7. Emotional Atmospheres and rules
8. Family development



Process of Assessment

Assessing the needs of individuals and families can be a complicated process.

All circumstances are different, all people are different – some will readily communicate their needs as they see them and discuss their problems and difficulties openly. Others may find it difficult to discuss their situation as they may feel embarrassed, vulnerable or just totally unable to cope with looking closely at their existing life circumstances.

An assessment takes into account all these different elements and a care programme is carefully designed to match the individual needs. A programme will offer both 1:1 sessions where a resident can discuss his or her problems in total confidence, small group sessions where residents can share their views, discuss their difficulties and provide support for each other's life skills training such as parenting or household budgeting and relaxations.

Each family is allocated a key worker to provide the ongoing support and attention they need whilst at Care 2 Share. The key worker is also responsible for collating the assessment reports and co-ordinating the family's programme even though they may not be undertaking the work themselves.

Care 2 Share staff are trained in delivering the PAMS 3.0 parenting assessments to enable more vulnerable parents who have learning difficulties to be assessed using a parenting assessment that meets their individual needs.

Although the care and work "packages" are tailored to suit the needs of each family, they also conform to a general pattern, which forms part of our overall service. This includes:

- Training in Social and life skills.
- Reviewing the children's needs – physical, emotional, intellectual and cognitive.
- Preparation for living independently in the community.

Assessments are carried out for an initial term of six to twelve weeks (dependant on need) during which time regular reviews are undertaken. These reviews are attended by the families and others such as social workers who have been directly involved. These meetings primarily aim to examine the progress of the programme, making any changes and adaptations that are considered necessary.

If at the end of the assessment period, it is considered that the family would benefit from an extension to their placement, the reasons for this would be given in writing to the placing authority.

Before a family leaves Care 2 Share, a carefully planned community support package is recommended to ensure the family has the support needed to transfer the skills learnt whilst residing in the residential units into independence skills when returning to the community. The community support package is designed so that it can be provided by the placing Local Authority's own in-house resources however Care 2 Share can provide these community support packages if required.



Observation Methods

We take a holistic approach to all of our assessments underpinned on the principles of task centred working.

Throughout any assessment period a detailed set of notes are taken that form the basis of our observed evidence. This is done as discreetly as possible when supervising child-parent contact. These notes are available to the parents to view. During any sessional work, detailed notes are again taken and they, combined with the daily observations, provide the evidence for the final report compiled.

We offer clearly structured feedback of an assessment but wherever possible decrease this, allowing parents to make their own choices based on the knowledge that they have gained. We are conscious that “being in a goldfish bowl” and being watched can be intrusive and challenging. However, this provides the opportunity for parents to show exactly what they can achieve and their understanding of what being a parent entails.

Before any assessment takes place, parents are provided with a programme of work and they are given the opportunity to add into this should they feel there is areas of work they would benefit from that are not covered in the programme of work provided. The basis of the programme of work is decided at an initial planning meeting, involving not only professionals but the parents too.

Work sessions vary in approach and style. Some subjects are interview/discussion based but others include the use of practical “hands on” experience, question and answer sheets, pictorial quizzes and tick lists. We can also spend “working days” with the family looking at the suitability of their daily routines, to include all aspects of child-care and home management as well as fitting in leisure time.



Supervision and Observation

Care 2 Share staff are experienced in working with families where children have been or are going through, court proceedings. Some families have tight restrictions placed on them whilst at Care 2 Share to ensure their child/children's safety.

Depending on individual family circumstances, our supervisory techniques can range from round-the-clock staff care through to supervision during the child's key times only, such as mealtimes, bath and bed times. In all cases, the need for placing restrictions is explained in the placement planning meeting and parents are requested to sign their placement plan to evidence their acceptance of such restrictions and supervision.

We regularly review restrictions with the aim of reducing them in order to make life as normal as possible for the family. However, this is only done so when it is considered safe for the child.

On a daily basis, staff keep a detailed account of a family's progress to include any observations. The key worker will regularly use this as a reflective tool for the parents and as a focus for discussion.

Families are set regular work sessions per week which includes at least one play and one child development session. It is taken very seriously if these sessions are missed although family commitments are taken into consideration.

Care 2 Share's premises are monitored by CCTV video cameras. Such intense observations form a major part of the assessment process. Parents are observed in their natural relations with their children and with each other without the presence of staff and the dynamics this third party can interject. Such observations record images only and not sound. The CCTV cameras also provide a useful tool in monitoring safe caring and issues relating to child protection concerns.



Putting Programmes into Practice

Discovering a new skill, creating a work of art or preparing a nutritious meal, all contribute to self-esteem and renewed confidence. We therefore encourage parents, as far as we can, to either continue with a favourite hobby or give something new a try.

The list of activities that are available is broad and suits individuals with a range of interests and abilities. There is also a focus on developing skills, which not only enlightens the individual but also benefit the family as a whole. Nutrition is an area for example where parents can learn and develop a range of skills, to include the preparation of nutritious meals and the planning of menus to the family's dietary and financial requirements.

Care 2 Share also runs regular play sessions. We take the subject seriously and while recognising it as an intrinsic part of the growth and development process of a child, it is also one of the most constructive and enjoyable methods towards helping families overcome their difficulties.

Play takes a parent/s and their child, momentarily, into a land of make believe where problems can be put to one side and they enjoy each other's company. It also encourages loving, physical contact which both parent and child may be seriously deprived of.

To help parents continue with the benefits of play sessions in their own time, we have a toy library where staff can advise on borrowing age appropriate toys. Parents are also encouraged to join local toy libraries and play groups so they can begin to build confidence in socialising with other parents and enjoy the benefits of participating in community activities.



Direct Work with Families

Care 2 Share work positively with parents to address their particular problems while also undertaking an assessment of their ability to put their children's needs first and to parent safely. A range of work is undertaken with the parents to address their individual needs.

Child's Needs

Areas of work include:

- ❑ Emotional, physical and developmental needs
- ❑ Play and stimulation
- ❑ Routines
- ❑ Handling
- ❑ Nutrition and weaning
- ❑ Childhood illness
- ❑ Challenging behaviour
- ❑ Safety
- ❑ Basic hygiene
- ❑ Sterilising and making up feeds
- ❑ Menu planning
- ❑ Boundary setting
- ❑ Speech and language development

Meeting the Parent's Needs as a Parent

Areas of work include:

- ❑ Budgeting
- ❑ Coping with challenging behaviour
- ❑ Keeping children safe
- ❑ Forming a relationship with their child
- ❑ Responding to the needs of their child
- ❑ How past events impact on the present and make the need for change a difficulty
- ❑ Building a child's self-esteem and confidence
- ❑ Roles and responsibilities of being a parent
- ❑ Shared care
- ❑ Coping with parental stress
- ❑ Shared routines
- ❑ Why babies cry
- ❑ Role models

- ❑ Family work: Building a family Unit
- ❑ Relationship work
- ❑ Taking “time-out” in a safe and planned manner.

Meeting the Parent’s Needs as an Individual

Programmes are undertaken individually and with couples before they are brought together to identify strengths, protective factors and areas of continuing concern.

Areas of work include:

- ❑ Protection and awareness
- ❑ Anger management
- ❑ Domestic abuse
- ❑ Loss and bereavement
- ❑ Self-esteem and confidence building
- ❑ Relationship work
- ❑ Family therapy
- ❑ Alcohol/Substance misuse. Random drug testing can be completed.

All of our assessments are carried out under a written letter of instruction if the case is in family proceedings.

In addition, parents receive weekly feedback sheets highlighting both positives and areas of concern that need to be addressed. Parents are able to make comments on the feedback sheets and are encouraged to talk to staff about their own areas of concern.



Promoting Self Esteem

One of the areas requiring concentration when people arrive at Care 2 Share is their lack of self-esteem and confidence. Often it impacts on their belief in their own abilities and affects the way in which they perceive their worth. For this reason address this area quickly.

Care 2 Share's self-esteem programme aims to focus solely on the person rather than the "failing parent," "useless partner" or "friendless person." It encourages individuals to focus on their strengths and abilities rather than their failings and weaknesses. By doing this we are helping parents to regain a sense of belief in themselves.

Each session looks at who the person feels they were, where they are now and where and how they would like to be in the future. Without fail, the positive achievements in a person's life are focused upon and each session ends by reinforcing these. Assertion techniques are also encouraged as fear and lack of self-esteem can often lead to aggression.

We encourage parents during the final stage of the assessment process to identify individual community activities which they can engage in such as aerobic classes and adult learning classes. It is important that parents have time for themselves and are confident to socially integrate into community activities. Such activities normally have crèche facilities provided but where they do not, we are able to offer child minding service as we feel it is important that social confidence is built during the final stages of the assessment.



Anger Management

Even though anger is a natural healthy emotion, it can also prove to be highly damaging which is why we have constructed a programme to analyse and unravel some of the complexities that contribute to someone losing control. Only once we have got to the route of anger, can we help families to deal with difficult situations in a controlled way.

Initially the programmes often start individually with partners being included at a later stage. Following these sessions, the programme is reviewed and any areas requiring further work are identified. These areas are then revisited and completed only when the staff member feels there is a sustained change in behaviour and attitude.

The programme itself concentrates on identifying the source of anger, the “triggers” and the need to change. This is done by drawing up a 5 Stage model of anger escalation and at which points the client feels angry and why. A safety action plan with strategies on how to “cope” is then composed with the focus heavily on the safety of everybody involved in any given situation.

The joint sessions look at the causes, effects, acceptable and unacceptable behaviours, amongst others, to make positive changes for the future.

The anger management work is closely linked with other sessions undertaken at Care 2 Share such as domestic abuse and other abuse programmes. These programmes are often used in conjunction with one another and so are designed to compliment each other.

If a parent is participating in counselling with other services (Life Line, Haven, FDAC) consultation is sought as to when it is appropriate to begin such sessions to avoid overload and to manage the emotional spillage that such sessions can bring on.



Dealing with Domestic Abuse

Domestic abuse is often seen as the “hidden violence.” The violence which can happen over and over and if not addressed effectively can ruin family life and destroy the intimate and complex relationships within a family setting. Care 2 Share addresses this issue and bases its approach on the needs of the child first and foremost combined with the views of the courts.

Even though we adopt 3 different approaches of dealing with domestic abuse, in every case the parents are given a clear and detailed understanding of the impact it has on a child and its long-term consequences. Our programme is also dependent upon the partners acknowledging that there are problems in their relationship which need to be addressed.

The 3 Approaches are:

- ❑ The need for a mother to be separated from her violent partner by looking at available choices.
- ❑ Work with both partners on their relationship and the role which domestic abuse plays.
- ❑ Work with fathers who are violent to their partners (and where for safety reasons, they need to be assessed before rejoining the family).

It is acknowledged that in some situations, females are the perpetrators of domestic abuse. As with other programmes, this is flexible and is adapted to suit individual circumstances.

Violence of any form is not acceptable at Care 2 Share. However sometimes families reach breaking point with violence being the end result. Whereas most incidents result in the ending of the placement, in some cases they do not and depend upon the welfare of the child at Care 2 Share, the situation and the protection of other residents.

Care 2 Share has an affiliation with ‘Haven’ a specialist resource in the borough of Waltham Forest which offers 1:1 support to women who have suffered violence or abuse. All women who have suffered abuse in their lives are referred to receive weekly 1:1 counselling during the course of their placement at Care 2 Share.

Care 2 Share also encourage mothers and fathers to complete the Freedom Programme which is an online course designed to support both male and female victims and perpetrators.



Awareness of Abuse

This programme is essentially aimed at confronting the many issues surrounding the protection and specifically, the abuse of children. We work with both victims and perpetrators of abuse for which there is often some overlap between the two.

An essential and integral part of the work is protection awareness where staff continually assess the clients' understanding of, and ability to, protect their own children. As part of this work, parent/s have the opportunity to construct their own "safety plan" for the children under the guidance but not interference of, the staff involved.

Parents are therefore given the tools, skills and strategies needed for the future although we cannot guarantee that they will constantly be able to put these into practice.

A variety of techniques are used, including interviews, role-plays, words and feeling games, pictorial methods, open confrontation and challenges. Due to the nature of this work, a number of "ground rules" are also applied, including punctuality for sessions on the part of both staff and client, the banning of oppressive language or behaviour, mutual respect and honesty.

In addition all women who have suffered abuse in their lives are referred to the 'Haven' a local resource which offers weekly 1:1 counselling during the course of their placement at Care 2 Share.



Substance Misuse Programme

Care 2 Share employs a specialist substance misuse and assessment worker who works with parents to identify and access both medical and professional support if they are misusing substances.

Parents are assessed as to whether they accept that they are misusing substances and the associated risks they pose to themselves and their children and whether they are willing to get the support they need in order to stop misusing.

Where necessary, during the assessment, Care 2 Share will with agreement from the placing authority, arrange for regular random drug/alcohol testing and parents will need to demonstrate capacity for change and consistency in their resolve to abstain from misusing any substances.

Parents will be provided with advice and support from staff and the centre will provide associated literature and information regarding risks and support networks.

All parents who are in need of support regarding their misuse of substances are referred to the Local resource 'Change, Grow, Life' following an assessment to engage most parents will be expected to attend a ten week programme to address their misuse.

Misuse of substances whilst undergoing the assessment will be treated as a serious issue and risk factor and Care 2 Share will reserve the right to terminate a placement if it is felt that children, staff or other service users are being placed at risk or if there is any disruption at the centre due to substance or alcohol misuse.



Family Therapy

Care 2 Share “family therapy” work uses a number of creative techniques to help families help themselves by identifying problem areas within the family Units and rectifying them in a positive way.

Our approach largely involves encouraging parents to “open up” through methods such as story telling, which takes the immediate focus off the person with the “perceived problem” and dealing with it in a non-threatening way. Using fictitious characters and events to create similar but different stories to address issues also works well. This helps parents relate their own experiences to the story. They are able to understand the risk they pose to their child and how they can provide a safe environment for the future.

Similarly, “play people” are used to depict family members or professionals in situations where issues are normally too difficult or painful to talk about. Where required there is an external therapist liaising directly with the family.

The approach we take depends entirely on the family’s circumstances. The staff work closely with the family, social networks and professionals outside of Care 2 Share to tailor a package designed to meet their needs.



OUR AIMS AND OBJECTIVES



Our Aims and Objectives

Care 2 Share aims to work with people from all sections of the community and individuals with a non-judgemental and empowering approach.

We aim to provide a friendly and caring atmosphere by way of sensitivity, respect for the individual and understanding. This will be achieved by appropriate relationships and a structured approach for the families involved.

Each parent and child is valued as an individual and has his or her wishes or feelings listened to and taken into account.

We will consider the cultural, racial and linguistic needs of our clients and wherever possible make serious efforts to meet those needs by the provision of appropriate resources.

Care 2 Share is committed to providing an environment which is free from discrimination and will encourage and enable families to maintain their dignity, freedom of choice and their rights as individuals. We will also facilitate their rights to privacy.

We will safeguard the family's dignity and rights and respect them as individuals. We aim to work in an anti-oppressive manner at all times.

- Client confidentiality will always be promoted and respected.
- Care 2 Share will work in the best interests of the parents/carers and their children and collaborate with them to ensure they are defining services and participating in the decision making process.
- We will develop and sustain positive working relationships with children, adults, families, carers and groups.
- To carry out effective assessment in order to minimise factors which cause risk or need and promote use of families' strengths and resources.
- Care 2 Share recognises that each family is individual and composed of unique family members. Staff are committed to working with each family group in a way that reflects and respects that individuality. We strive to tailor every assessment to meet the individual circumstances of each family.

- Supporting parents/carers and their children through the process of change.
- To provide relevant information and advice to individuals and families.
- A commitment to working in partnership with children, their families and carer groups to help them explore, understand and resolve their difficulties and whenever possible to promote and work towards the maintenance of family networks.
- Networking between individuals, agencies, community resources, volunteers and other professionals.
- A commitment to support and fulfil the requirements of the Local Authorities we work with.
- Work in accordance with statutory and legal requirements and Ofsted.

Care 2 Share's Specific Aims:

- To work in partnership with families and other professional colleagues. Families are consulted and are fully involved in all aspects of their assessment.
- To provide an environment where residents are respected and valued and where the ethnic and cultural diversity of the residents and staff in the Units are celebrated.
- To promote positive attachments between parents and their children. We do this by offering support and education, discussing the importance of praise, affection, role modelling etc with parents. Parents are also praised for their achievements.
- To prevent family breakdown and keep children safe, by keeping the child's needs in focus throughout the assessment, with the safety of the child being paramount.



ADMISSION CRITERIA

DOCUMENT REVIEW

PAPER VIABILITY ASSESSMENTS

ADMISSION CRITERIA

EMERGENCY ADMISSIONS PROCEDURE

FAMILIES JOINING CARE 2 SHARE

ADMISSION TO THE UNITS

THE PLACEMENT PLAN

SUPPORT AND ADVICE



Document Review

This service offers the opportunity for parties to send us key documents including a referral form, the most recent Social Worker Statement and a Key Expert's report to review. We will then produce a response usually by email providing our opinion of the validity of conducting a residential assessment of the parents. This service is offered as free of charge.

CARE 2 SHARE – Paper Based Viability Assessment

This service offers a more detailed report than the Document Review email. Dependent on the specific nature of the instruction, the report will be written in accordance with our own criteria. Costs for this service are dependent on the volume of papers to consider. If possible we will ask to interview the parent/s for a period of up to two hours.

This service may be useful in situations where the parties are in disagreement to the proposal for residential assessment. We request for parties to provide a list of questions they wish to be addressed. They are intended to provide parties with further evidence that the parent should be considered for assessment of their suitability to undergo a full parenting assessment. We attempt to complete these assessments within 14 working days of receiving legal papers to review.

We do not attend court for Document Reviews or Paper Reports if we have not met a parent as we are only reviewing the information provided by others and therefore have no new evidence. If we have met a parent and are called to give evidence then a charge of £100.00 an hour is made along with travel expenses.



Admission Criteria

The expectation is that placements at Care 2 Share are planned. This enables the family to visit the Units, meet some of the staff, become familiar with some of the expectations of their assessment and participate in their placement plan. Consideration is also given as to the likely effects of the family's admission upon the existing residents.

Eligibility Criteria

A service will be offered to eleven families with children between the ages of 0-10, who fit the following criteria:

- Where the need for an assessment has been identified through a case conference or court proceedings.
- Where there are child protection concerns that require an assessment of the parents' abilities to keep their children safe and free from harm or neglect.
- Where care proceedings have been initiated on at least one child in the family.
- Where a child is accommodated by any Local Authority and a need for a residential assessment has been identified through care planning.
- Where there are sufficient concerns about the safety of a newborn baby, that the mother and child cannot return to the community and the child's name has been placed on the Child Protection Register.
- In the case of specialist assessment for a parent with a learning disability, our criteria for assessment is that one or both parents must have a diagnosed learning disability that falls within the mild – moderate learning disability range.
- Families are only admitted once they have given their consent to reside in a centre where the use of CCTV cameras are in use 24 hours a day.

Families that the Units Cannot Accommodate

We cannot accommodate families where:

- A member of the family is dependent on a wheel chair for all or some of their mobility (the Units is not accessible to people needing to use wheelchairs).
- A family member has an illness or disability requiring specialist equipment or intensive nursing.
- An adult family member is currently drug or alcohol dependent and is refusing to abstain or not seeking help through engaging with any relevant support services.
- An adult family member has been convicted of sexual offences against a child or young person.
- Children are unaccompanied.

Families That May Require Further Assessment Prior to Admission

Further discussions will be necessary if a family member fits into any of the following categories:

- There is a history of drug or alcohol misuse.
- They have diagnosed mental health difficulties.
- They have a significant learning disability
- Display excessively violent behaviour.
- Give rise to significant concerns as to the safety of either staff or other residents for any other identifiable reason.

A residential assessment is not deemed automatically inappropriate simply because a family member falls into one of the above categories. However, where such circumstances do apply and the need for a placement is clear, a further assessment of risk must be carried out.

We are also able to meet the requirements of families arriving in the United Kingdom to seek asylum or as unaccompanied minors. We are able to provide trained staff in meeting the needs of families who have encountered the trauma of war or civil unrest and have experienced loss, bereavement and separation from their homes, family and communities.

We can accommodate parents/expectant parents aged 15 and above depending on individual risk assessments.



Emergency Admissions Procedure

Care 2 Share recognises that it is not always possible for Local Authorities to engage in a lengthy planning process when making referrals to place families in our care.

It would therefore be necessary for Care 2 Share to occasionally consider emergency referrals.

The Registered Manager would have to ensure that any emergency referral made by a Local Authority is given careful thought and consideration.

It is likely that such a referral would be made by telephone by the Local Authority. The Manager would request as much significant information as possible about the families' background and current circumstances. The Placing Authority would have to provide faxed or emailed reports, background information and referral forms before a decision would be made. On receipt of the information the Registered Manager would consider the needs of the family and whether Care 2 Share would be able to meet those needs.

Another important consideration would be to look at the needs, care plans and behaviour patterns of the existing family at Care 2 Share in order to establish that the new family would be able to be placed with minimum disruption to the other placements.

If it were felt that the new referral would be disruptive or that the needs of that family would outweigh Care 2 Shares service provision, Care 2 Share would not accept the emergency referral.

If an emergency referral is accepted, the Registered Manager would request an urgent planning meeting to take place with the social worker and any other significant parties within 72 hours of an emergency placement to discuss the care plan for that family. It is crucial that even in the case of emergency admissions, that the family are aware of the use of CCTV cameras and given their consent to reside in a centre in which these are in use 24 hours a day.

A family coming to live at Care 2 Share as an emergency referral would be welcomed to the Units in accordance with Care 2 Shares 'Special Welcome Procedure' for emergency referrals.



Families Joining Care 2 Share

Care 2 Share is particularly aware that the transition from a family setting to one of being looked after is unsettling and upsetting for any family. Staff realise this and are ready to offer support through what can be a very emotional and confusing experience. The emphasis will be on consulting and informing. Two information packs, (the 'Residents' guide' and the 'Children's guide') covering facilities, procedures and opportunities, will be available, together with the opportunity to freely discuss life within Care 2 Share and the part that they can play. It is at this initial stage they will be given the chance to discuss their needs and wishes, and will be introduced to the other families in residence, who will already be aware that a new member of the house community is joining them.

Care 2 Share will work closely with the Placing Authority in ensuring that appropriate care plans are in place to meet the needs of families on their arrival at Care 2 Share.



Admission to the Units

We would normally hope to be involved at an early stage in the planning process with the aim of agreeing a written care plan at the point of admission.

When a family is referred, a senior member of staff will be nominated to take responsibility for the collection of information and ensure continuity during the referral and admission process. When an initial enquiry is made, referrers will be advised of the information required in order to consider the referral and facilitate the setting up of an initial care plan.

The information required from the Social Worker will include:

- A detailed family history.
- Reasons for current reception into care.
- Copies of all documentation held on file by the referring Social Worker regarding the families' past history.
- The level of learning disability

We believe that any successful intake procedure is a combination of good quality information received, about potential residents and the recognition that the process of introducing a family to the Units should be carried out with an effective response to the families' immediate need for stability and security and without unnecessary delays which create stress, anxiety and uncertainty.

An initial period of assessment will take place for two-five weeks, following which, a full case review would have to be arranged by the Social Worker involved, enabling the initial care plan to be restructured more comprehensively or amended if necessary.



The Placement Plan

All admissions and departures from the Residential Units are planned and agreed in advance with the family concerned and any relevant professional. In exceptional circumstances e.g. non-accidental injury to a child, a placement may end abruptly but where possible an emergency meeting would be called to plan the family's departure.

Referrals are received from a field social worker prior to admission. This should include a complete referral form with all background information outlining concerns and an up to date chronology, any other relevant facts about the family and the purpose of the assessment. We also ask that copies of recent reports be forwarded to us.

This then enables us to complete a risk assessment and draft a placement plan. The placement plan will be further discussed and completed with the family at their introduction meeting usually at their date of admission.

The parents, allocated social worker, Guardian, Care 2 Share's allocated key worker and Care 2 Share's Unit or Deputy Manager all attend the introduction meeting to discuss the details of the placement. A draft placement plan is discussed to which parents are actively encouraged to contribute. This forms the focus of the work carried out during the assessment and will be amended as necessary to reflect significant changes in the circumstances of the family. The final placement plan is formulated after this placement plan and is referred to as the 'programme of work' to which parents, the Unit or Deputy Manager and the Local Authority social worker all sign.

Care 2 Share considers the Placement Plan to be central to the sustained progress and development of the family. With emphasis on longer term plans developed by the Placing Authority it assesses their needs and guides and focuses on their care and development.

When a placement planning meeting is held, Care 2 Share complete a written form detailing the thoughts and feelings of the parents in which parents can share any areas of concern or disagreement.

The Placement Plan covers the areas of:

- ❑ Health needs and health promotion
- ❑ Care needs including safeguarding and promoting welfare
- ❑ Physical and emotional needs
- ❑ Education needs and attainment targets

- ❑ Cultural, religious, language and racial needs and how they will be met
- ❑ Leisure needs
- ❑ Contact arrangements with family, friends and significant others

At Care 2 Share it is a key principle that at every stage the family themselves will be involved in both the development of the Placement Plan and any subsequent review. The family will have access to a written copy of the Placement Plan and a record of any changes. This will be presented in a form, which enables them to understand it.

The key worker is indeed central to the development of the family while at Care 2 Share. They guide day-to-day activities and will spend one-to-one time in weekly working sessions with the family, offering support and guidance whenever require. It is their responsibility to ensure that the Placement Plan is carried out in practical daily life.

The plan will be reviewed on a regular basis, reflecting change and development as the family becomes fully settled and wherever appropriate other partners such as the Placing Authority and/or parents or carers will also be involved.

The Manager or one of the deputies will be involved in all reviews involving the Placing Authorities and will take the initiative in arranging a review if one is appropriate or is statutorily required. He/she will work in co-operating with other partners such as carers and parents to ensure that the views of all those concerned with the family's' development are involved. As with the development of the original Plan, the family will be encouraged and enabled to contribute and when any review is completed, will receive a written and understandable copy of the review report.



Support and Advice

At Care 2 Share each parent/carer and child is very much an individual and it is recognised by all the staff team that each resident brings with them particular experiences and strong preferences and each holds unique hopes for the future. As a consequence of this approach, each family member receives support on an individual basis as they work through the many issues that all children/adolescents/ adults encounter in personal, health, social, relationship and sexual matters. They are encouraged to approach any member of staff with particular concerns as all staff are trained to listen and respond constructively and with empathy.

Where there are relationship problems and the individual concerned experiences isolation, active measures will be taken to help them to feel part of the Care 2 Share community and communicate more confidently with their peers.

If language skills are a problem, support will be provided to help the family express their views and communicate with others.

In some cases the help of outside professional services will be helpful. A range of identity issues, around gender, religion, race, culture, language or sexual orientation, can be explored and resolved with outside help, provided the young person themselves feels this will be useful to them.

Where an individual has experienced sexual abuse, whether as a victim or as someone abusing others, support and counselling will be provided in a way which respects the wishes of him or her and engages their co-operation. Where it is agreed and deemed appropriate, referrals to Haven to receive weekly 1:1 support are made.

Particular support, acknowledging the possibility of trauma and isolation, will be provided for young people who are refugees or asylum seekers and wherever appropriate, the advice of outside specialist services will be sought.

To enable a parent/carer or child to develop a wider perspective on their experiences, he or she will have at least one person independent of either Care 2 Share or the Placing Authority with whom they can make direct contact and discuss in confidence personal problems or concerns about their living arrangements.



LOCATIONS

LOCATIONS OF THE UNITS

ACCOMODATION

SAFETY AND SECURITY

FIRE AND EMERGENCY PROCEDURES



LOCATIONS OF THE UNITS

Care 2 Share's Residential Unit in Walthamstow is referred to as 'No 19'. It is a spacious Victorian house offering six placements and is situated in a predominantly residential area in the London Borough of Waltham Forest. Walthamstow Village has a friendly community atmosphere and is a generally quiet and pleasant part of the local area.

Local amenities of Walthamstow are within a two-minute walking distance from Walthamstow tube and train station and Walthamstow central shopping facilities.

The Walthamstow area benefits from a wealth of facilities including a long street market, Health Centres, Opticians, Dentists, Libraries, Post Offices, Banks, Chemists, large and small Supermarkets, Grocers, Retail Outlets and a variety of Places of Worship for different Faiths. Local Leisure Centres are also in close proximity and offer a wide range of Recreational Facilities.

Our second residential Unit based in Leytonstone is referred to as 'Wallwood Road.' This too is a spacious late Victorian house offering five placements and is situated in a predominantly residential area in the London Borough of Waltham Forest. Leytonstone Village has a friendly community atmosphere and is a generally quiet and pleasant part of the local area within close proximity to all Shopping and transport facilities and a short distance from Epping Forest and open fields.

Local amenities are at close proximity in Leyton/Leytonstone and the family centre is situated near good bus/tube/rail transport links. BR Leyton Midland and Leytonstone Central Line tube are within short walking distance. The Westfield Shopping centre in Stratford and Olympic Stadium are also within easy reach in the neighbouring area of Newham.

The Leytonstone area benefits from a wealth of facilities including Health Centres, Opticians, Dentists, Libraries, Post Offices, Banks, Chemists, large and small Supermarkets, Grocers, Retail Outlets and a variety of Places of Worship for different Faiths. Local Leisure Centres are also in close proximity and offer a wide range of Recreational Facilities.



Accommodation

The sleeping accommodation at No 19 consists of six bedrooms, 3 doubles and 3 singles.

The Centre contains:

- 2 kitchens
- 1 shower room
- 2 bathrooms, one with separate shower
- 4 toilets
- 5 washbasins
- 1 lounge
- 1 play room
- 1 laundry room
- 1 large garden
- 1 staff shower and sleep in room
- 1 staff sleep in room

The Residential Centre can accommodate six families. Each family is provided with their own bedroom and would share communal washing and cooking facilities which comprise of two bathrooms and a shower room and three WCs. There is a communal lounge, play room and laundry room available for use at all times and 2 shared kitchens. The communal garden also offers play facilities.

The sleeping accommodation at Wallwood Road consists of five bedrooms.

The Centre contains:

- Three double bedrooms
- Two single rooms
- 2 shared kitchens
- 1 lounge
- 2 bathrooms
- 1 separate staff shower room and toilet
- Play room
- Laundry room
- Staff office
- Large garden

The house consists of five family bedrooms. Each family is provided with their own bedroom and would share communal washing and cooking facilities which comprise of two bathrooms with showers and three WCs. There is a communal lounge and play room, a laundry room available for use at all times and 2 shared kitchen, a large garden with play facilities.

On both units each family is provided with their own bedroom, seating and dining areas are provided in the bedrooms alongside multi channel TVs and good quality bedroom fittings and furnishings.

The bathrooms, lounge, kitchen/diner are well equipped communal areas.

The Units' overall décor and layout has been designed to meet the specific needs of parents and children providing a well decorated, clean and pleasant environment.

Parents are able to use the office telephone to communicate with professionals. Both units offer wi-fi services and parents are able to engage in using the internet, which has restrictions on content that would not be deemed appropriate for parents to access.

Typical groupings would be:

- 1 parent and 1 child
- 1 parent and 2 children
- 2 parents and 1 child
- 2 parents and 2 children
- Expectant mothers
- Mother and baby
- All under fives to share bedrooms with parents for the purposes of the assessment.

Internal Facilities

Groups on offer promote good parenting, increase life skills and provide opportunities to break isolation by increasing social networks. Groups available include:

- A parenting course.
- Life skills classes.
- Parent and Baby groups (regularly attended by a health visitor).
- Toy library.
- Haven 1:1 Counselling for victims of violence and domestic abuse

We also provide a range of one off workshops that respond to current concerns of families accessing services at the Centre:

- Domestic violence.
- Stress management.
- Confidence building/Assertiveness.
- Emotional attachment
- Play and stimulation

Families undergoing a residential assessment are supported to attend groups in the Units that are identified as beneficial to them.



Safety and Security

Entry to and from the buildings will be controlled in a manner consistent with normal domestic security with all external doors being kept locked but not so as to prevent their use as emergency exits. The front doors will only be attended to by staff.

All visitors and other callers/visitors to the units will be monitored and the identity of all visitors/callers will be checked and verified.

Emergency Lighting is fitted in accordance with standard NICEIC regulations.

Monthly Health and Safety checks and inspections of the Home will be carried out by a nominated Senior member of staff who will be trained in Health and Safety matters and who will report any defects or potential risks to the Manager, Deputy Manager or in their absence to the current shift leader as appropriate, who will ensure that remedial action is taken promptly. A checklist will be used to ensure that a comprehensive inspection is made on each occasion. Where appropriate a Dangerous Incidence Form must be completed and processed.

Both sleeping and waking night staff will be provided as necessary. During normal waking hours, the staffing rota will provide for a minimum of 3 staff on duty at any time however staffing ratios will be led by occupancy levels and the needs of the families.



Fire and Emergency Procedures

Procedures in the event of a fire are displayed in each family room and in communal areas. On admission, each family is shown where fire doors and alarms are located and also where the fire assembly point is.

All new members of staff receive written instructions and individual training on fire precautions as part of their induction.

All visitors to Care 2 Share are asked to sign the visitors book so that in the event of a fire, it is known who is in the building.

A nominated member of staff tests the Fire Alarm each week. Fire drills are undertaken periodically as defined by the fire safety branch of the London Fire and Civil Defence Authority. Fire drills will take place without advance warning, and all those in the building at such times must evacuate the building immediately. It is the aim of the Units to undertake a fire drill within the first week of each family's placement.

Fire fighting equipment is placed and appropriately maintained in accordance with regulations and the terms of the Fire Service Certificate and any other relevant guidance.

The Units are equipped with Emergency Lighting which will come on in the event of the fire alarm being triggered. This lighting will ensure that residents are able to safely find their way out of the building in the event of an incident when it is dark.

Care 2 Share are non-smoking buildings. Any resident or visitor found to be smoking anywhere within the building will be engaged in a discussion about the extent to which they may be endangering their own life and the lives of other people.

Any member of staff found to be smoking anywhere within the Units is liable to disciplinary action being taken against them.

On Detection or Suspicion of a Fire

Where a fire has been discovered that has not triggered the fire alarm, the person discovering the fire must manually activate the alarm at a fire point. Where the person discovering a fire is a resident, they should then evacuate the building quickly and by the most direct safe route available.

Where the person discovering the fire is a member of staff, they should at the earliest safe opportunity telephone the Fire Service by dialling 999, asking for the fire service and then stating clearly:

“ Fire at 19 St Mary Road, Walthamstow E17”

or

“Fire at 17 Wallwood Road, Leytonstone E11”

Where there is a Manager on duty at the time of the emergency, they should take the responsibility of acting as Duty Fire Officer, ensuring the evacuation of all residents and staff from the building through the nearest and safest designated fire exit. If no Manager is on Duty, then a staff member should undertake this role.

Nobody should attempt to retrieve personal belongings.

All residents and staff must assemble at the designated assembly point opposite both units, the Duty Fire Officer must take a register to ensure that a full evacuation has been completed.

No person should re-enter the building until told that it is safe to do so by a member of the Fire Service.

Residents should not tackle a fire under any circumstances. Members of staff should only do so when there is a clear indication that the fire is a minor one that can be tackled safely with a fire extinguisher or blanket.

Emergency Evacuation

The same procedures apply when evacuating the building in any other emergency situation, e.g. bomb scare, gas leak, as do when evacuating because of fire. Likewise, no person should re-enter the building until told that it is safe to do so.

Intruder Alarm

The house is fitted with a sophisticated intruder alarm system, which will be linked to the nearest police station.

Sensor Lighting

The external areas are fitted with sensor lighting to the front and rear of the house.

In The Event of A Serious Incident

A copy of an evacuation plan will be displayed in the main office.



FACILITIES AND SERVICES

FACILITIES AND SERVICES

SOCIAL WORK METHODS

CONTACT WITH FAMILY AND FRIENDS

RECORD KEEPING



Facilities and Services

Social Work Focus

In line with the Children's Act 1989/ 2004, the Home recognises the importance of the family. Wherever possible and appropriate, the work will focus upon helping the family to affect a return home and upon supporting parents and carers to maintain the progress.

Particular emphasis will be given to the need to involve families and carers as appropriate in the decision making and care planning process. In addition to individual work with children and parents/carers, work with whole families will form part of the overall service provision. Formal group activities, social, sporting and leisure activity groups, special interest projects, social casework and outreach work will form an integral part of the service provision.

Social Casework

Upon admission, the family will be allocated an experienced Key Worker who is responsible for ensuring that the areas agreed in the placement plan are met. The key worker is responsible for both undertaking direct sessions with the child and parents in ensuring that the whole family understands the areas of concern that need to be addressed, as well as designating work to other team members. The Key worker will produce three detailed and robust, evidence based assessment reports throughout the course of the assessment which will highlight the strengths and difficulties of parenting skills, pertaining to safe care and risk and will make recommendations for the long term care needs of the child in placement.

The Units Manager holds ultimate case responsibility and supervises the key worker in directing the work of the assessment and in writing the assessments reports. The Units Manager and Key Worker will alternatively work with the family's social worker if appropriate but will also be the vital link between the work at the units and other professionals and family.

Family Work

Staff will be committed to ensuring, wherever possible and appropriate, that children and families are offered the best possible opportunity to resolve their differences. For this reason, family work will be an important feature of our service.

Arrangements for Education of Children

The Unit's staff will be committed to ensuring that each child of school age receives an adequate education that is consistent with their age, ability and potential. Continual education will be preserved wherever practically possible. However, close liaison with local schools will be carried out by staff, to ensure that wherever appropriate the child will be educated with the local community. We recognise that for some children's mainstream education may not be possible due to exclusive return to school.

In those cases close corroboration with the education authority will be carried out towards providing a suitable educational alternative.

Individual Work

This may take many forms including counselling, life work, special interest activities and projects, assertiveness training, communication skills training and risk assessment. Individual work can offer valuable opportunities for family to achieve in their own right without the constant fear of rivalry. Increased self-esteem and self-confidence enable individuals to channel their energies into worthwhile activities. Upon admission each individual will be offered a programme according to their wishes and assessed need.

Group Work

Effective communication reduces conflict. Both parents/carers and children's and staff behaviour if inappropriate will be challenged and everyone will be expected to accept responsibility for their actions and the subsequent effect these have upon others. It is acceptable for families to challenge or question staff about their actions provided that this is carried out in a manner which respects the person concerned. Staff will always act as appropriate responsible adults and therefore, there will be times when parents/carers and children's decisions will be overruled in the interest of their safety and that of others.

Group work will be used to ascertain the weekly progress of the family. This information is vital to the weekly staff meeting and the formation and adjustments to the family's individual programmes. This provides the opportunity for family members to give their views about their progress and their individual programmes which will be forwarded to the staff meeting for inclusion in the discussions. An accurate account of the subsequent discussion following the family's progress reports will be relayed to them as quickly as possible after the staff meeting. This will be conveyed to them in privacy in a sensitive fashion ensuring respect for the individuals concerned.

The smooth running of the Units will greatly depend upon the commitment of all concerned and therefore everyone's views and wishes will be respected and given consideration when making decisions. A residents' meeting is held once a week in which residents are encouraged to express their views constructively regarding any issues relating to smooth running of the Units.

Individuals often express pain in negative ways therefore it is important for staff to maintain positive attitudes which outweigh their negative feelings. This creates an emotionally safe environment to encourage individuals into new ways of thinking and behaving.

Key-Worker System

Each family will be allocated a key-worker upon admission. The Key Worker has responsibility for ensuring that appropriate medical and dental checks are carried out, the wishes of the children and their parents or carers are considered, schooling issues are attended to and social and cultural needs are accommodated. The key worker will ensure that particular attention is given to maintaining/enhancing regular contact/consultation with the young person's family/carers in accordance with the 1989/ 2004 Children Act and that appropriate consideration is given to the views, wishes and feelings of the individuals concerned. An allocated Key worker will ensure that specific time is allocated on a regular basis to have talks/discussions with the family and will produce regular reports outlining the progress or problems the family may be experiencing. The Key Worker will report to staff meetings any opinions or thoughts the family may want to share and would then report any relevant points and issues back to the family

Where required and with the necessary approval or guidance of the Units Manager, the Key worker may set up and implement specified programmes for the family. The Key Worker will be responsible for ensuring that an effective liaison is continuously maintained between the family and other professionals within the Units and all external agencies and relevant parties involved.

Social and Leisure Activities

Wherever possible a family's special interests will be catered for, particularly if these have been a feature of their lives prior to admission. Physical activities, hobbies and interests help to channel parents/carers and children's' energies and release anger and aggression. Achievements, no matter how small, will be greatly encouraged by staff as a move towards changing their perceptions of themselves.

Preparing and Reviewing Individual Programmes

Effective communication and a cohesive staff team is vital if families are to be allowed the opportunity to develop, mature and reach their potential. It is therefore vital that the whole staff team meet on weekly basis in order to review the weekly programmes of each parent/carers and child.

Each member of staff will share their perceptions of the progress of each child according to the agreed plan and the key-workers will report any significant changes, which could affect the welfare of the child.

Co-Key workers will be appointed to support and assist key-workers experiencing difficulties with a particular family to ensure that stress and conflict are kept to a minimum.



Family and Friends

Care 2 Share considers that it very important for a family to have consistent and regular contact with family friends and significant others. Every effort will be made to enable and encourage contact. The Placement Plan drawn up on admission includes arrangements and expectations on contact – by visits, by telephone and by e-mail. Wherever appropriate, parents and friends are encouraged to take part in activities at Care 2 Share.

In cases where there are restrictions on contact, imposed for the protection of the parents/carers or children, this is clearly stated in the Placement Plan. Where supervision is required, staff will follow guidelines on arrangements to be made.

Visitors

Care 2 Share recognises the importance of maintaining links in the community and the valuable support that friends and family can provide.

We seek to encourage residents to keep in contact with family and friends that they have previously had a close relationship with throughout the placement, except in circumstances where there is evidence that a family member or significant person is hindering the assessment process. Therefore, visitors are welcome in the Units by prior arrangement between the hours of 11am and 5pm unless it has been otherwise agreed only one family member can visit at any one time.

Residents can receive visitors either in their own family rooms or any of the communal areas, showing consideration for the other resident family. Visitors need to be made aware of the use of CCTV cameras in the centre.

Any restriction on visitors will be discussed and agreed prior to the start o the placement and detailed in the placement plan so that all parties are clear this can be reviewed as the placement progresses.

Staff at Care 2 Share reserve the right to ask any visitor to leave the Units if their behaviour is such tat is poses a risk to any resident or member of staff. Except in extreme circumstances, staff will try to discuss their concerns with the visitor so they have the opportunity to change their behaviour accordingly.



Record Keeping

The recording and the way information is safeguarded is shaped by the following key principles:

- The person to whom any information refers has a right to see and comment on what has been written.
- They have a right to know for what purpose the information is to be used and to whom it will be given.
- They can expect the information to be kept safe and secure, respecting their right to confidentiality.

Each family has a file in which written records are kept. This file is stored safely and securely in a locked filing cabinet in the office.

Daily recordings are kept in order to ground the assessment in evidence-based knowledge. The content of information gathered and recorded will be restricted to those areas specified in the Assessment Framework and therefore relevant to the assessment being undertaken. These are internal notes and form part of the assessment reports completed.

Weekly feedback sheets are shared and discussed with parents each week in key working sessions. Parents are encouraged to make comments, particularly if they disagree with the content of the recordings. Information gathered on a daily basis is used to compile detailed reports at intervals throughout the family's placement at Care 2 Share, which are also shared with parents.

The Courts may sometimes dictate the number and frequency of reports required if care proceedings have been initiated. However, it is our aim to provide a report after each phase of the assessment, totalling three.

Information is written clearly and factually in order to facilitate the family's understanding. If required, reports can be read out to parents and full explanations are always given so that families understand why we collect the type of information that we do.

Confidentiality

Residents are informed that a record of the work with them is kept and that a number of people have automatic access to it.

- Service Manager
- Registered Manager
- Residential Social Workers
- Field Social Worker

In addition to those people listed, a number of other people can be given information i.e. where joint working is being undertaken or where the pooling of information is needed to safeguard service users or workers and to plan appropriate work.

The Confidentiality Code is available separately and gives guidance as to when information can be given to other people without the service user's permission and to the way information is to be safeguarded.

Access to Files

All service users have a right to see what information the Units holds about them.

- A formal request to see a file needs to be in writing.
- When the request is received, third parties should be immediately contacted to seek their view on sharing any material provided. If they fail to respond then the material is presumed to be freely accessible to the family.
- Within the next 40 days arrangements should be made for the family to see their file and to be told if they are being refused access to any information.
- An appropriate worker must be present when the family read their file.



MANAGEMENT AND STAFF

STAFF STRUCTURE

SHIFT HANDOVER

STAFF SUPPORT

STAFF TRAINING



Management and Staff

The Registered Provider is responsible for the overall running of Care 2 Share and for monitoring and developing the welfare of the children young people by ensuring that unannounced monthly visits are conducted of the home and these visits are written up into monthly Regulation 25 inspection reports. This also give an opportunity for any staff member or parents/carer or child to discuss anything of concern in confidence if necessary.

The completed reports are filed for Ofsted inspection but are also available for the management and staff of Care 2 Share to read. As Care 2 Share stresses the full involvement of the staff team, their response and suggestions for further developments will be welcomed and encouraged.

The Units is comprised of a Registered Manager who is responsible for the overall running of the Assessment Centre and for developing and monitoring the welfare of the families.

The staff team comprises of qualified social workers, graduates, trainee social workers and experienced family support workers who will be trained to at least level 3 in Health and social care in working with children and young people/families or will be proceeding towards obtaining a level 3 within 12 months of being employed at Care 2 Share. All staff will be encouraged to proceed towards gaining further relevant professional qualifications and career progression.



Staff Structure

One Registered Manager, two deputy Managers and 14 full time residential family support workers currently staff both units. The staff team can comprise of males and females who are diverse in background and representative of the local community with a wide range of experience in children and family work.

No member of staff (including agency staff and volunteers) are able to take up an appointment with Care 2 Share without adequate police checks and reference to the Disclosure and Barring Service

All references will be followed up and a full employment history with a satisfactory explanation of any gaps will be obtained.

Staffing At the Home and Organisational Structure

If the Unit is fully occupied there will be a minimum of three staff on duty during the day comprising of the Manager, a deputy or senior and residential support staff during the day shift. However there will be frequent occasions when more staff are required as members of staff are required to accompany families out of the Home, i.e., GPs, Court etc. If the Units are not fully occupied staffing levels will be reduced in accordance with risk assessments.

The morning shift will start at 7.30.am with the sleep in member of staff to finish at 10.00am.

The Manager or a senior staff member will be on shift from 9.00am to finish at 6.00pm on weekdays. (The Manager is on-call out of hours)

The Evening shift will begin at 5.00.pm with a minimum two members of staff (depending on occupancy level) to finish at 11.00.pm.

The sleep in shift will begin at 11pm to finish at 7.30 am.

Waking night staff work from 18:00 until 09:00 the following day.

If necessary, additional evening cover shifts and additional day shifts at weekends may be worked depending on the number of families on units and the support needs of families.

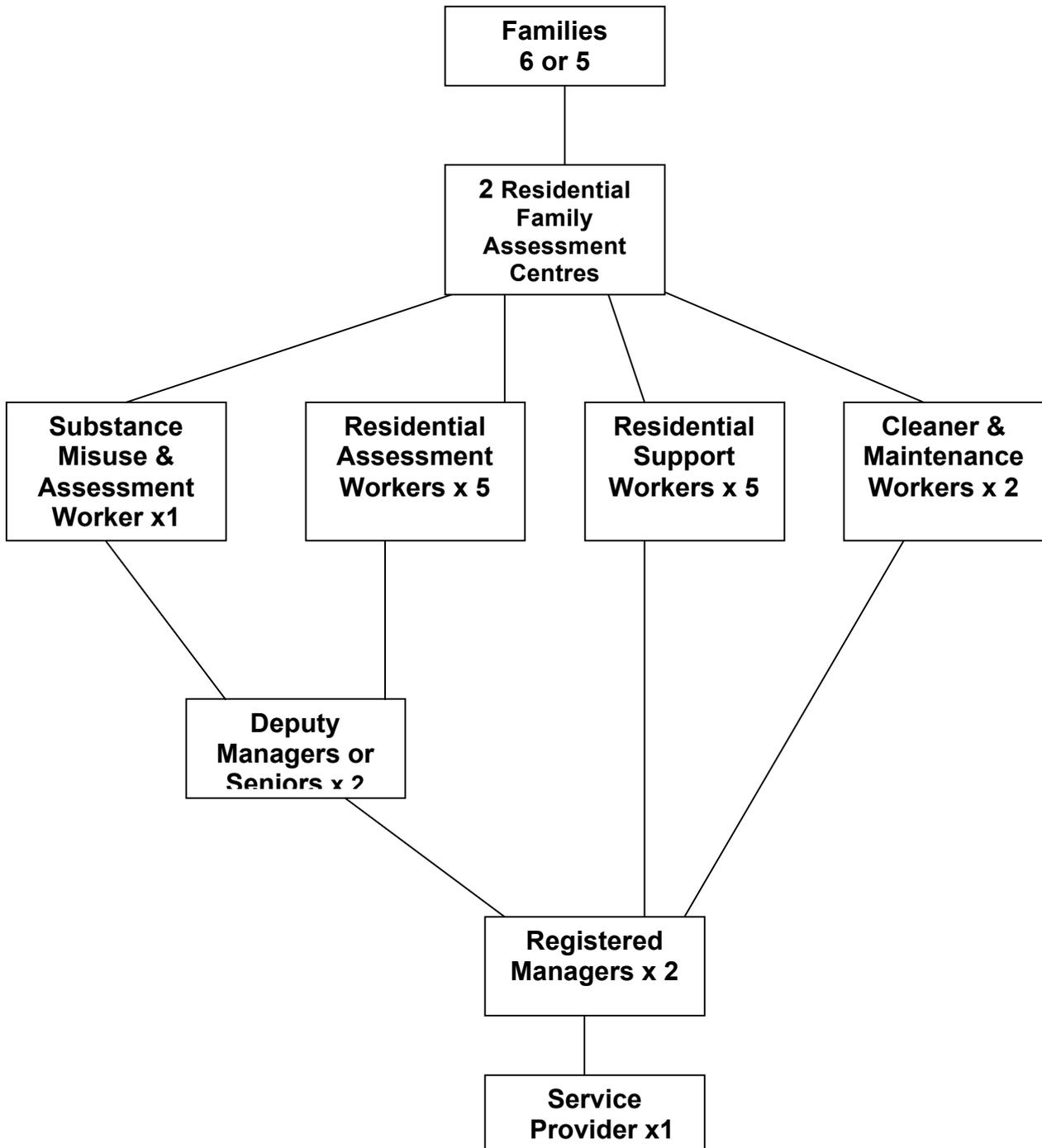
Shift Handover

Handover takes place between 9.00am and 10.00am and 5.00pm and 6.00pm before the change of shift. Incoming and outgoing staff can exchange and evaluate relevant information, discuss ongoing strategies, child protection issues and staffing issues.

If a Keyworker feels that any issue raised at handover should be discussed with a family, then the information will be shared with the family at an appropriate time after the meeting.

In the interests of staff care, members of the outgoing shift will be encouraged to share their concerns with a senior member of staff or the oncoming shift before returning home.

Structure





Staff Support and Training

Care 2 Share places importance on providing adequate support for staff to enable them to work constructively towards the development of the family in their care. New staff in particular receive one to one supervision on a regular basis (at least once every two weeks), but all staff have regular access to management and an ethos of discussion and support is fostered. This is also implemented in the use of staff meetings and extended handovers. Case discussion, debriefing and support are a vital focus of staff communication and team meetings.

We feel that the emotional health of the staff is vital in the healing process for distressed families. Staff can address such issues in monthly supervision. In addition, we have an independent consultant who supports and advises the Registered Manager and staff in a non-supervisory capacity offering. We will aim to accurately identify training and personal development needs in line with National Requirements and Standards.

At Care 2 Share we consider ourselves an “investment organisation”. We believe in investing in the training and development of our staff. To be able to provide a quality service to our service users, we must ensure that all our staff have access to “training learning and development opportunities. This means supporting each individual to achieve their full potential by becoming “active life long learners”

Staff will be encouraged to pursue relevant social work qualifications where necessary and fully qualified staff will be encouraged to participate in courses or training to improve their skills and keep up to date with any changes in relevant legislation and social work methods. All staff whether qualified or unqualified will be evaluated for training purposes.

Ongoing training will be provided both within the home and through external courses and staff will be expected to be fully participant in further training as we feel this is a necessary factor in achieving positive outcomes for children and their families.

Training includes full induction training, covering safeguarding procedures, fire training, health and safety, first aid, equality and diversity, medical procedures and record keeping. Foundation training would follow within six months. All staff would have a Personal Development Plan, drawn up as a result of discussions between management and the individual and receive at least 6 days paid training per year. Where staff do not have the necessary skills, training will be provided to enable them to reach the required standard.

We Aim To:

- Integrate learning into everything we do.
- Encourage our staff to choose training that they need to enhance their skills and knowledge.
- Facilitate and encourage staff with different roles to learn together and from each other.
- Offer a variety of learning opportunities within Care 2 Share.
- Provide equal access to learning opportunities for all staff regardless of their positions within Care 2 Share.
- Ensure that Care 2 Share works with staff to remove barriers to their learning.

Staff Appraisal System

All staff have their work formally appraised at least twice a year. This gives an opportunity for an open discussion of both identified problems and strong points within the individual's work performance. It leads to the setting of targets and time scales for achievement during the coming year. It also forms the basis for the agreement of training needs to be met as part of the individual's Personal Development Plan.



Qualifications and Experience of the Staff Team

Relevant Qualifications and role of the Responsible Individual

The Registered Provider is Nina Chaudhary BA HONS/PQSW DIPSW DIPHE. She possesses in excess of 20 years' relevant children and family work experience. She is a qualified Social Worker and experienced Manager of social care services. She is the Service Manager for the whole of Care 2 Share and has overall responsibility for a number of services. She supervises the Registered Managers of the Residential Family Assessment Centres and holds overall responsibility for the 2 Centres and case management in the registered Manager's absence.

Relevant Qualification and Role of the Registered Manager

The Unit Manager of the Family Centre based in Walthamstow is Sandra Reynolds she is a qualified youth worker 1986, and a qualified social worker 1998, she also holds a NVQ 5 in management 2007 and is a PAMS Trained Assessor 2015. She has twenty five years experience working full time with children and their families in Local Authorities and the voluntary sector. She is an experienced manager and trainer who has managed & trained social workers in Local Authorities social work teams in child protection and assessment of children and their families. She is an accredited NSPCC Safeguarding Trainer and a practice teacher for the many London universities offering social work degree courses to social workers in training.

The Unit Manager of the Family Centre based in Leytonstone is Samantha Jay. Samantha is a qualified Social Worker, a PAMS Trained Assessor and a PIRAT Assessor. Samantha also holds a diploma in child psychology as well as a degree in Leadership and Management and an NVQ3 in Childcare and Education. Samantha is an experienced manager, managing family support services and Children's Centres.

Relevant Qualification and Role of the Deputy Managers

The Deputy Manager deputises for the manager in all aspects of her work. The deputy managers are responsible for supervising the Residential Family Assessment workers and Residential Family Assessment Workers. In conjunction with the manager the deputy is responsible for the day-to-day case management of families whilst at the Centre and produce detailed assessment reports for the referring Social Worker.

The Deputy Manager post at No19 is currently vacant. The registered manager is being supported by Samantha Jay and Nina Chaudhary until a suitable person can be found to fill this position.

The Deputy Manager of Wallwood Road is Louise Palombini. Louise is a Social Worker, PAMS Trained Assessor and holds a level 5 award in Management and Leadership. Louise is experienced with working with families and children.

The Number, Relevant Qualifications and Experience of the Residential Support Staff

The staff team is a mix of professionals both qualified and unqualified workers from various disciplines social work, youth & community work, NNEB, health, paediatric nursing and psychotherapeutic backgrounds. All unqualified workers are supervised by qualified social workers as required by the Regulations.

The staff team consists of a Manager, 2 Deputy Managers, One Substance Misuse & Assessment worker and ten Residential Family Assessment/ Support workers. All are experienced and trained at appropriate levels for the work undertaken.

All staff attend regular short courses relevant to children/families in order to keep their practice up to date. Our workers have a range of experiences and training which includes:

- Child Development
- Child Protection
- Risk Assessment
- Parenting Assessment
- Child Care Planning and Reviews
- Family Work
- Mediation
- Working & Communicating with Children
- Life Story Skills
- Attachment & understanding Resilience
- Working with Domestic violence
- Mental Health
- Working with Substance Misuse
- Court Work
- Outreach Work
- Diversity & Anti-Discriminatory Practice

Role of the Keyworkers

Keyworkers are qualified experienced practitioners from various disciplines who work with parents to enhance parenting abilities and are responsible for undertaking detailed assessments of families' needs, strengths and difficulties.

The keyworkers and co-key workers work closely with the senior practitioners on care plans and completing assessment reports.

Role of Residential Family Assessment & Support Workers

Residential Family and Assessment Support workers are experienced residential care workers from diverse professional backgrounds such as youth work, counselling and childcare. They co-work cases alongside qualified social workers bringing their own expertise and specialism to the parenting assessment.

Role of Support Staff

Supporting the work of the Residential units are two cleaners and maintenance person. Their roles are to ensure that the Units are maintained in a clean and safe condition.

Cover Arrangements if Registered Manager is Absence

There is a deputy manager to cover in the day to day absence of the Registered Manager.

When the Registered Manager is on leave then the service provider Ms Chaudhary and the Registered Manager from the other family centre takes on overall responsibility for the units. If it is the intention of the registered manager to be absent from the Centre for four weeks or more, then OFSTED would be informed in writing. Details of the cover arrangements for running the Units in her absence will be given.

Staff Shortages

If staffing levels are inadequate, (as a result of illness etc) the Manager or the Deputies will in the first instance, attempt to get suitable cover from the pool of workers. If this fails, staff will be approached to see if they are willing to do any overtime. If this does not cover the shortage, the Manager will seek permission to recruit agency workers through the Agency with whom the units have a working agreement with.

Staff Supervision

Supervision plays an important role in ensuring the service offered to families is appropriate, safe and meets their needs.

The Registered Manager is responsible for supervising the Deputies/Seniors and Assessment Workers and the Deputies/Seniors are responsible for supervising the Residential Family Support Workers. All staff will be expected to receive individual supervision within a four week and group supervision every second week.

There is an Appraisal system which incorporates both performance management and personal development plans, all members of staff are to have annual appraisal, which sets out their performance development targets and training programme.



QUALITY OF CARE

CONSULTATION

PRIVACY AND CONFIDENTIALITY

HEALTH AND WELL-BEING

EDUCATION

PERSONAL APPEARANCE AND POSSESSIONS

LEISURE AND ACTIVITIES

CHILD PROTECTION

REPORTING ABUSE OR SUSPICION OF ABUSE

ADULT PROTECTION

VETTING OF VISITORS



Consultation

The ultimate aim of Care 2 Share is to enable vulnerable families to take responsible decisions and make informed choices. To achieve this, we consider it essential that every individual is involved and consulted about the decisions and surroundings that affect their life – whether on day-to-day matters or in major decisions that influence life choices.

In part this is achieved by an ethos of openness and of sharing of information. Within the home environment, staff routinely discuss choices and discussions with the family, fostering a sense of ownership and responsibility. There are also systems and procedures in place to allow consultation in a more structured way (key worker sessions, discussions, 1:1 sessions, residents meetings etc).



Privacy and Confidentiality

All staff at Care 2 Share respects the families' wish for privacy and confidentiality. Given the sensitive nature of child safeguarding issues, there will however be times when actions have to be taken which may infringe privacy. Where this is the case, Care 2 Share has in place strict procedural guidelines as to what actions can be taken, by whom, and in what circumstances. These cover issues such as access to personal records and the passing on of information, the entering of rooms and the searching of personal possessions, and health, personal and hygiene matters.

Care 2 Share respects that individual family members have a right to privacy and dignity.

We recognise the need to balance parents and children's privacy and confidentiality, with the need to gather information for the assessment in order to give constructive feedback to parents and protect children.

The following steps are taken to minimise the intrusion into family life and to protect the dignity of family members.

- Members of staff will always knock before entering a resident's family room and will wait for a response.
- If there is no response after a member of staff has knocked, the member of staff will verbally let the family know they are about to enter the room.
- If a member of the family says that they are dressing staff will not enter, but will negotiate a reasonable period of time for the person to finish getting changed before doing so.

There will be occasions when members of staff have no alternative other than to enter a room without permission.

- If a member of staff suspects that illegal drugs or non-prescribed medication are being consumed in the room
- Where there are grounds for serious concerns about the health and safety of a child.
- Where there are grounds for serious concerns about the health and safety of a parent.

In either of the above situations confidentiality will need to be broken and sharing of information with other professionals will occur on a 'need to know basis'.

Where repair work or other work needs to be undertaken in a family room, the family are to be given as much notice as possible. A member of staff should remain in the room while any work person or contractor is working in the room in order to ensure that the family's property remains safe and to protect the contractor from possible accusations of theft or damage.

Restrictions imposed on a family during their assessment at Care 2 Share are kept to a minimum. Any restrictions that are imposed are fully explained and are included in the Placement Plan.

Within these restraints families are given as much independence as possible with everyday choices being up to the family.

When a couple jointly resides at the Assessment Centre it is recognised that they will need time together and 'couple time' is built into the weekly programme in which child minding is provided fortnightly to allow the couple to have free time off the units.



Health and Well-Being

Care 2 Share approaches the promotion of the health and well being of the family being looked after in three ways:

The Health of the Individual

A clearly written health plan is included within the placement plan and includes both mental history and the current health profile and needs. This includes prior written permission from the person with parental responsibility for the children for the administration of first aid and non-prescription medication. A full record is kept of any accidents or illnesses and family and carers are informed and consulted whenever appropriate. There is a prompt response to any health problems and professional help is called upon whenever necessary. Any medication or treatment for minor problems, not requiring the assistance of a doctor or nurse, are only given by competent designated staff and a full record is kept of any treatments or refusal of treatments. All staff are inducted in basic first aid awareness and safe handling of medication. Members of staff are actively recruited with backgrounds in nursing.

The Promotion of a Healthy and Safe Living Environment.

High standards of cleanliness, pleasant bright surroundings, good food and a range of other facilities all form part of an environment which encourages confidence and well being of the residents.

Advice, information and support – on issues around nutrition, personal hygiene, smoking, alcohol, sexually related matters and the many other concerns that impact on the health of a family. Staff are trained to discuss these matters positively and are also sensitive to issues such as bullying and abuse that have serious consequences for both physical and mental health.



Education

Care 2 Share recognises educational attainment as an essential part of development in adult and children. Schools or colleges are considered partners in the development of the children and efforts are made to liaise with them on a regular basis.

Each child of school age residing in the Units has a personal education plan which outlines not only the choice of educational facilities but also any special educational needs and also includes monitoring of attendance.

Care 2 Share will assist parents to ensure that arrangements are made for travelling to and from school or college and that the child has the right equipment for his or her studies.

Parents will be encouraged to promote their children's participation in extra-curricular activities and staff will assist parents to attend meetings and other school events.



Personal Appearance and Possessions

Staff will assist families with advice on planning and budgeting and where necessary, accompanying them on shopping trips. To avoid misunderstandings, there is a policy on personal allowances clearly explaining the system to family members and clear records are kept.

Families will need to take responsibility for their personal possessions and will be encouraged to respect each other's property.

Cultural, ethnic and religious expectations regarding clothes and possessions are recognised and positively promoted.



Leisure and Activities

At Care 2 Share families are actively encouraged to take part in activities and events that celebrate their race, culture, religion language or interests. This can include birthdays and name days, New Year, religious festivals and traditional ceremonies.

Achievement in sporting and leisure activities is recognised and encouraged and wherever possible adequate financial resources are provided. It is recognised that inevitably some activities carry risk and is a part of a family's development that within reason, needs to be accepted. Where this is the case, a risk assessment is undertaken and procedures and professional support put in place to ensure any risks are minimised.

Families are encouraged to join staff in planning activities and outings. They are also encouraged to use local leisure and sporting facilities.



Safeguarding

It will be the primary responsibility of staff to promote a safe and secure environment for children in their care and Safeguarding Procedures are established to ensure this happens.

Possible instances where Safeguarding Procedures may be instigated within the Home:

- ❑ Disclosure by a child of abuse which occurred prior to admission.
- ❑ Disclosure by a child or other young person or staff, of abuse by a member of staff within the establishment.
- ❑ Disclosure of child-to-child abuse within the Home.
- ❑ Disclosure of abuse from others outside the Home.

Reporting abuse or suspicion of abuse

If allegations are made to a member of staff, that person will explain that such information cannot be held in confidence and will be reported. A senior member of staff would be immediately notified and this notification would be followed up with a written report. The senior member of staff would then have to report the incident to the Child Protection Investigation Team who will decide whether further investigations are necessary. The senior member of staff would also notify Ofsted. In a situation where a senior member of staff cannot be located, the member of staff concerned would report directly to the Local Child Protection Team.

All staff, including bank staff, receive training on the prevention and recognition of abuse. This forms part of the induction training and is updated at regular intervals. The training includes:

- ❑ Understanding the impact of the young person's history and any experience of abuse.
- ❑ Being aware of the relationships between young people.
- ❑ Recognising the signs of possible involvement in prostitution.
- ❑ Guidelines on spending one-to-one time with young people.
- ❑ Guidelines on physical contact between staff and young people.
- ❑ Guidelines on administering medication.

All staff are trained to use appropriate child protection procedures in the event that abuse is alleged or suspected. They are aware of the issue of prostitution and vulnerable young people and are trained to be aware of any possible signs.

They are also made aware of actions to be taken should abuse involving senior management be suspected or alleged.

Should an accusation be made against a member of staff, he or she will have access to support and information whilst the investigation is carried out. The registered manager or a senior staff member will need to inform the LADO locally and the placing authority. Ofsted should be informed and invited to any related strategy or investigative meetings and be kept informed of outcomes of any investigations.

Staff must be familiar with the London Child Protection Procedures and the content of the internal procedures for Care 2 Share. Staff should also be aware that they can contact the OFSTED/ Registered Provider directly in order to raise any concerns they have about practices in the service which may put children at risk of abuse or serious harm.

Staff Training and Support

The Centre is committed to giving all new staff training on Safeguarding Procedures as part of their induction programme.

All staff members will have the opportunity to further their knowledge and training by attending a range of courses directly and indirectly linked to child protection.

Ongoing support and guidance for staff will be available through weekly team meetings and supervision sessions.

Staff Actions when an Allegation of Abuse is made

Failure of staff to report actual or suspected physical or sexual abuse of a child by another member of staff or other person having contact with the child may constitute a disciplinary offence.

Where a member of staff receives an allegation of abuse of a child or suspects that a child is being abused, that member of staff must ensure that they do not ask leading questions of the child or give any guarantees of confidentiality.

Staff Must Never Agree to Being Given Information 'In Confidence'

Children may try to discuss such matters 'in confidence' as a way of trying to share the burden of the abuse but without risking their relationships with family members. However, entering into such an agreement with a child means that the member of staff could receive information that not only has the child been abused but that possibly other children and young people are at risk of being abused or are being abused.

This is an impossible position to be in for any member of staff. It will inevitably lead to the member of staff breaking their promise to the child to keep the issue 'secret'.

Reporting Allegations

Staff are made aware during their induction period and through ongoing training, of their individual responsibilities for reporting any child protection concerns.

Staff must report the allegation as soon as possible to the senior member of staff on duty. If the incident occurs at the weekend or in the evening, the on-call Manager must be contacted.

The senior member of staff will inform the child's Social Worker as soon as possible and ensure that a copy of the written record is passed to them for their file.

The Registered Manager (or Deputy in the Registered Manager's absence) will notify OFSTED if new disclosures arise requiring a child protection enquiry, during a family placement. There is no need to inform them of any child protection concerns that were known prior to placement.

The Registered Manager (or Deputy Manager) will ensure that any concerns are reported to the registered person, a police officer, an officer of the Commission, an officer of the local authority in whose area the residential family centre is situated or an officer of the National Society for the Prevention and Cruelty to Children, when required to do so.

Any concerns relating to physical, sexual, emotional abuse or neglect of a child or young person (up to the age 18 years old) should be discussed firstly with the Line Manager and then passed on by telephone or in person to the child's/young person's social worker.

Indications of Continuing Risk of Abuse

Where there is any indication that the abuse has taken place within Care 2 Share or that the child may be at risk of continuing abuse, OFSTED, The Local Authority Social Work Team and the Registered Provider must be informed immediately alongside The Child Protection Investigation Team.

Where such indications come to light outside normal office hours, the on-call Manager must be contacted immediately. The Out of Hours Duty Social Worker may also be contacted for advice.

The Registered Manager would have to ensure that suitable vetting procedures were in place in order to identify prospective job applicants/ staff that may be unsuitable to work with vulnerable adults as they may need inclusion on the Protection of Children and Vulnerable Adults Registers.

It is Care 2 Share's policy to ensure that rigorous staff recruitment and selection procedures are in place for the protection of adults and children including Disclosures and Barring Service Disclosures.

(Care 2 Share's Separate Child Protection Policy details staff procedures when dealing with Child Protection matters).



Adult Protection

It is essential that adult family members are also protected from physical, psychological, sexual, self-harm and financial harm, particularly as they are likely to be vulnerable and in need of intensive support from those around them. This would include safeguarding their interests and well being at all times.

At Care 2 Share there is a written adult protection policy in place for staff and residents to refer to.

The policy will ensure that:

All incidents or allegations of abuse will be reported to the Registered Manager or Deputy Manager and dealt with under similar procedures to our Child Protection Policy.

The Manager will ensure that there are specific procedures in place to respond to suspicion or evidence of abuse and to ensure the safety of vulnerable adult family members. (Including whistle-blowing or passing concerns onto OFSTED)

The Registered Manager would keep the relevant Social Worker, OFSTED and Registered Provider informed of any allegations or investigations.

Care 2 Share will ensure that all incidents or allegations are appropriately recorded including the relevant action taken.

The Registered Manager would have to ensure that suitable vetting procedures were in place in order to identify prospective job applicants/ staff that may be unsuitable to work with vulnerable adults, as they may need inclusion on the Protection of Children and Vulnerable Adults Registers.

It is Care 2 Share's policy to ensure that rigorous staff recruitment and selection procedures are in place for the protection of adults and children including DBS Disclosures.



Vetting of Visitors

Staff are fully aware of the procedural guidelines governing arrangements for visitors and the families themselves receive verbal and written guidance on arrangements for visiting. Parents and friends are not allowed unsupervised access to the other families in the house. In addition, any visitor who has not been satisfactorily checked by the DBS is not allowed unsupervised access. Records are kept of all visitors to the house. All visitors are made aware of the use of CCTV cameras in the units.



CARE AND CONTROL

GENERAL STATEMENT

RULES AND CONDITIONS APPLYING TO RESIDENTS

UNACCEPTABLE BEHAVIOUR

PHYSICAL RESTRAINT

RECOGNITION AND PREVENTION OF BULLYING

TERMINATION OF PLACEMENT



General Statement

Effective and constructive control is only effective where people feel consistently cared for. Achievement of positive experiences in a child or young person's daily life is just as important a goal as working on placement plans, focusing on gaining independence and managing negative behaviour. A particular member of staff i.e. Key Worker should provide the same level of concern and interest in the young person as a parent normally would. Staff awareness of daily negative and positive experiences should provide an adequate basis for regular discussion. Staff should provide a positive response to the family's requests and participate fully in social activities to provide the young people with a valuable experience of enjoying themselves alongside adults.

Good order is easy to achieve where an established framework of general routines and individual boundaries of behaviour are well defined. There must be appropriate provision for the social, physical, emotional and intellectual needs of the parents/carers and children. It is vital that there should be structure to the day and that the correct balance should be achieved between free and controlled time.

Whenever the behaviour of a family causes concern or is otherwise inappropriate, unreasonable or unacceptable, staff will assess the situation as it arises and intervene if a young person or member of staff is at risk or harm. Details of the incident must be recorded showing time, date and place of the incident and giving details of those involved and discussed at the earliest opportunity between those involved and a senior staff member.

Consistency between staff is crucial and the home will examine and review their mechanisms for ensuring this is achieved. Staff will be supported in dealing with control issues through a range of wider processes i.e. supervision, management, teamwork, opportunities for consultation with other professionals and training. Staff should ensure that they act reasonably and responsibly from genuine concern for the individual and in accordance with guidelines at all times.



Rules and Conditions Applying to Residents

Assessment

Families are requested to keep themselves available for the period of the assessment and to attend all related meetings. This means continuous residence at Care 2 Share and organising activities around planned meetings.

Families are asked to set time aside each week to read and sign the previous week's feedback. This gives an opportunity for both staff and parents to discuss the previous week's events.

All residents and visitors are expected to treat each other and staff with consideration and respect. Abusive, racist or threatening language or behaviour will not be tolerated. This includes visitors to the family.

During the placement, parents retain responsibility for their children and are expected to provide an appropriate level of supervision. In order to respect children, parents are asked not to smack their children. Staff will advise alternative methods of discipline.

Time Out

For the first two to five weeks of placement (the initial Assessment period) all parents are escorted by staff when off units with their children while staff undertake a risk assessment.

Thereafter if it is agreed that parents are able to go off the unit unsupervised, during the week this is for a period of two hours and at weekends a period of three hours. Families are asked to return within an agreed time.

It is an expectation that all families are returned to the Units by 6pm unless a later time has been negotiated and agreed in advance.

Childcare for important appointments, where it is unsuitable for a child to be present or in exceptional circumstances, can be negotiated.

Housekeeping

Residents are responsible for ensuring living areas are clean and safe. Unit staff will support parents with regard to this and will monitor living areas to ensure there is an acceptable level of hygiene and safety for children's well being.

An approved electrician must check any electrical equipment brought to the Units by resident families. We will endeavour to arrange that items are checked as soon after residents move in as possible as they cannot be used until this has been done.

Laundry facilities are available at the Units and residents are asked to treat the facilities and equipment with respect.

Residents with a car will be asked to show that they have up-to-date car documents and appropriate child seats before taking their child(ren) out in it.

Visitors

All resident families and their visitors must enter and exit the Units via the front door. In order to ensure the safety of all resident adults and children, staff are responsible for opening and closing the doors as people either enter or leave the building in order to monitor who is in the Units.

It is the responsibility of adult residents to explain to their visitors that if present they will be included in the observations. If staff feel that any visitor is hindering the observation or behaving inappropriately, they will ask them to leave.

Any restrictions on visitors will be discussed and agreed prior to the start of the placement and detailed in the placement plan.



Drugs and Alcohol Policy in the Centre

Alcohol, Drugs and Smoking

Residents are asked to inform staff at Care 2 Share if taking any medication. A record is kept of any medication being taken by a family member (whether homeopathic, over the counter or prescribed).

No alcohol or other drugs are allowed on the premises.

The Family Centres are non-smoking buildings. Smokers will be shown designated smoking areas outside the building where ash bins are provided.

Alcohol and drugs are not allowed on the premises other than those by a doctor. Staff must be informed if any member of a family is taking medication whether homeopathic, over the counter or prescribed. Details of the medication and for what purpose it is being taken, will be entered in the family file. All medication should be kept in the locked cabinet provided in the Staff room.

Alcohol or Drugs Found on The Premises

Any resident found to have alcohol or illegal drugs will be asked to hand them over to staff, who should secure them in the safe until further instructions from a Manager.

Staff should reiterate that alcohol and illegal drugs are not permitted. They will seek an explanation from the resident as to why they have brought the items into the Units. A written record will be made and the incident raised at the next placement update meeting.

Resident under the Influence of Alcohol or Drugs

If an adult resident arrives back into the Units under the influence of alcohol or illegal drugs, staff are to seek support from a Manager or colleagues. Staff will need to assess it is safe to let the resident in. This assessment should be based on:

- The demeanour of the resident i.e. is the speech slurred are they able to stand unsupported are they verbally or physically aggressive.

If staff feel it is unsafe, they will request that the Resident leave the premises and return later (A suggested time scale is 4 to 6 hours). It may be necessary to call the police for assistance if the Resident is reluctant to leave.

If a child or young person arrives at the Units under the influence of drugs or alcohol, they should be allowed to enter the Units unless in doing so they would cause a serious risk to others. Staff will seek support from a Manager or colleagues in order to assess what action should be taken. It may be necessary to seek medical help if it is felt that the child or young person may be at serious medical risk e.g. becomes unconscious.

The Registered Manager or Deputy Manager should be informed as soon as possible. A disruption placement meeting will be convened with the placing Local Authority to discuss and decide if the placement should be immediately terminated or whether the resident will be issued with a final warning.

Family Visitors under the Influence of Alcohol or Drugs

Any visitors to the Units who are suspected of being under the influence of drugs or alcohol will be asked to leave.

The member of staff on duty will speak to the Resident and request that they ask their guest to leave. Staff should remind the Resident that one of the conditions of residence is that they are responsible for their visitors. Staff will offer support to the resident to carry out this action. If there is any concern regarding safety to either staff or Residents, the Police may be called for assistance in removing the visitor.

A written record of the incident will be made. It would usually be the case that the visitor be asked to meet with a senior member of staff prior to any further visits so that appropriate behaviour for future visits can be discussed.



Unacceptable Behaviour

At Care 2 Share positive behaviour is recognised and encouraged. Staff build up relationships with the expectation that the family members will respond to interest and support from individuals who care about their future.

There is a clear code of acceptable behaviour but a degree of negotiation enables families to feel that this is for the mutual good rather than merely being imposed. It is stressed that all members of the Care 2 Share community, management, staff and families have both rights and responsibilities.

Unacceptable Behaviour from a Child

It will remain the responsibility of the parent(s) to impose any sanctions on children. If a child is engaged in unacceptable behaviour it is the parent's responsibility to deal with it. Staff will be available to give advice, guidance and encouragement if required.

If a parent fails to act and the behaviour is of concern, staff will prompt the parent to intervene. If the parent still fails to intervene and the behaviour continues, putting the child or another person at risk, staff will take direct control of the situation. In such cases both parent and child should be told verbally that the staff member is about to take action.

Physical restraint of a child will only be used by staff as a last resort to prevent likely injury or serious damage to property. Under no circumstances will staff use it as a punishment as a means to enforce compliance with instructions or in a response to challenge behaviour which does not give rise to reasonable expectation of injury or serious damage to property.

The care and control of the child should be handed back to the parent as soon as possible.

The incident will be recorded in the family file and then discussed with the parent(s) as soon as possible, but no later than 12 hours after the incident. The emphasis of the discussion will be on preventing a repetition of the incident and increasing the parent's skills and knowledge.

Unacceptable Behaviour from an Adult

If an adult resident is engaged in unacceptable behaviour, staff will ask to speak to the resident confidentially. They will then calmly and politely ask the resident to stop the behaviour explaining why it is not acceptable.

Staff will use their knowledge of the individual to calm them. In some circumstances an offer of a cup of tea and a chance to talk may calm the situation while another individual may respond to an offer of some time out of the Units.

If children are present, a second member of staff will endeavour to remove them from the situation, offering a distraction in another room. Children will be returned to the care of the adult when staff are confident that the adult is behaving reasonably and that the children will not be at risk of harm.

If the behaviour is putting individuals or property at risk staff will immediately alert colleagues to the situation so that there are staff members on hand to offer support if required. Staff can also telephone the on-call Manager for support if the incident occurs out of office hours. All staff on duty are provided with panic fobs.

Where physical damage is clearly the result of a deliberate act and is of a serious nature, it may be that it is appropriate to involve the police and treat the incident as a criminal offence. Except in the most serious of cases, it would not normally be appropriate to consider police involvement on the first occasion of such damage.

Assaults against members of staff are viewed very seriously and adult residents should be aware that police involvement in such circumstances is almost certain. The police may not be involved where the assault is of a very minor nature or where it is apparent that there was no intention on the part of the resident to cause physical harm to the member of staff.

Under normal circumstances, staff are not permitted to use restraining methods on adults. If an adult is in need of restraint, the police should be called. Only in extreme circumstances while waiting for the arrival of police may staff restrain adults if there is an immediate risk to residents or staff, following the restraint guidelines.

Informing Management

Any serious incidents should be reported to the Registered Manager and the Deputy Manager. If they are off duty, they should be contacted at home. They in turn will notify the Registered Provider.

Staff use a RAG (Red, Amber, Green) system to report concerns to the on call manager to ensure the overall safety and wellbeing of all children, parents and staff.

Recording the Incident

Serious incidents are recorded in the family file, giving date, description of incident, action taken, which was involved, injury or damage to property and any sanctions imposed. The report is then signed by the staff member and shown to

the resident concerned for them to sign as correct. If the Resident disagrees with the content of the report they will be encouraged to record their views at the end of the report.

Copies of the report are given to the Registered Manager and sent to the allocated Field Social Worker.

Follow Up Meeting

If the incident was of a serious nature, an emergency disruption meeting will be called with the allocated Social Worker at the earliest opportunity. The Registered Manager or Deputy Manager should be in attendance along with the staff that were on duty.

There should be a system of rewards (commendations, extensions of privileges etc) as well as sanctions. Where sanctions are felt as necessary, good professional practice indicates that these should be contemporaneous, relevant and above all just. Residents should have a say in the rules and sanctions. Wherever possible they should be made aware of the consequences of a particular misbehaviour. Every attempt should be made to find out why the behaviour occurred. Disapproval should be of the behaviour not the person. The response/behaviour of staff should be scrutinised as closely as that of the child. Confrontation and escalation should be avoided. Sanctions should be age appropriate and time limited and the family should be able to recognise the relevance of the sanction.

Sanctions, Which Are Not Permitted:

- Corporal Punishment
- Deprivation of food and drink
- Requiring a Child to Wear Distinctive Or Inappropriate Clothing
- The Use of Withholding Medical or Dental Treatment.
- Intimate Physical Searches
- The refusal of access to any telephone help-line providing counselling for children.
- The intention to deprive a child of sleep.
- The punishment of a group of children for a single child's act.
- The use of any child to impose a sanction against another child.

Acceptable Sanctions:

- Verbal Reprimand but Without the Use of Sarcasm or Belittling
- Reparation or Restitution of Damaged Goods
- Increased Supervision



Physical Restraint

Restraint should only be used as a last resort when all options have been exhausted or where there is a real threat of a parent/carer or child harming themselves, other residents, staff or other people or a serious threat to property. These are the absolute minimum necessary measure of restraint and no more may be used. Restraint should not be used on adults where the option of calling the police should be used if the behaviour of residents has got seriously out of control but only be exercised as a last resort. In extreme circumstances staff may need to consider restraining an adult while waiting for police to arrive, such intervention must only be made if the individual poses direct threat to another resident or member of staff. The restraint should be carried out maintaining as much sensitivity and dignity for the individual as can be managed in the circumstances. Particular caution must be exercised where staff are restraining a person of the opposite sex. Where possible a Manager should be informed of the restraint.

No member of staff should attempt to restrain a parent/carer or child alone. A dialogue should be maintained however difficult this proves to be, to establish the parent/carer or child's wishes. All restraints must be recorded on Incident Forms. The Social Worker will be provided with a full written report of the incident. Both the family and members of staff should be given the opportunity to talk through the incident with the staff member or Manager once calm has resumed.



Unauthorised Absence from the Units

Staff will need to understand that parents/ carers or children are often upset and need time to themselves. Families will be recommended to express this need for time and space to staff. Families will be strongly discouraged from staying away or placing themselves at risk. Staff will report a missing child to the police if unaccompanied. Staff will report the parent/carer or child missing to the Local Authority Emergency Duty Team if they do not return to the Units at the agreed time. Staff will believe that an individual is at risk when they are missing and are not where they have said they will be e.g. school, work, visit or an appointment. If a parent fails to return to the centre at the agreed time leaving their child behind at the centre than this is viewed as abandonment and social services will be informed, so that alternative care arrangements can be made for the child and is likely to result in the termination of the placement.

When an individual returns to the Unit after being missing, they will be given the opportunity to talk to a member of staff regarding why they went missing and any difficulties they may be experiencing. Where they find it difficult to talk to a member of staff they will be advised and encouraged to speak to someone independent of the Units and helped to choose an appropriate person for this.



Recognition and Prevention of Bullying

Care 2 Share does not tolerate any form of bullying, whether it is residents bullying another resident, a member of staff bullying residents or staff bullying other staff. This relates to all people working or residing at the Residential Family Assessment Centres.

If residents are found to be bullying other residents within the Units then it will be challenged and discussed with them by staff. This will be through key working sessions and meetings in order to make them aware of what they are doing and how they should change their interaction so as not to be a bully. Staff will constantly monitor and assess the situation ensuring that it is always challenged whenever it happens. Staff meetings will be used to discuss strategies to deal with such situations by the staff team.

If a staff member is thought or found to be bullying the residents then staff or other residents should bring it to the attention of a senior member of staff. Once the situation has been investigated and the alleged staff member has been given an opportunity to put their side of the story forward, management will make a decision as to whether any disciplinary action needs to be taken. Management will also decide whether they provide that staff member with more training and supervision in order for them to be more appropriate in their interaction with the residents.

If any staff member feels that they are being bullied by another member of staff then they should bring it to the attention of their Line Manager who will investigate the situation fully. Both members of staff will be given the opportunity to view their opinions in front of the Manager and a report will be made. Once the Manager has established that there is a problem of this nature then they will work with the staff member accused of bullying to encourage and help them use different tools of communication when interacting with staff so as not to be bullying.

Care 2 Share believes that the Home's environment should minimise incidents of bullying and encourage the reporting of any incidents. A policy on the prevention and handling of bullying has been drawn up and will continue to be revised in a process that involves both parents/carer, child and staff.

The policy includes:

- ❑ A definition of bullying – physical and non-physical on the grounds of gender, ethnic origin, religion, sexual orientation, disability or personality.
- ❑ A description of actions that constitute bullying, such as name calling, text messaging, ignoring or intimidating
- ❑ Measures that minimise opportunities for bullying
- ❑ An outline of ways in which young people should respond, should bullying occur
- ❑ Ways of supporting those who are bullied and working constructively with those who bully
- ❑ Training for all staff on the recognition and minimising of bullying – whether on the part of young people or staff



Termination of Placement

Where possible, departures from the Family Centre are planned and agreed in advance with the family concerned and any relevant professionals. However, in exceptional circumstances a placement may end abruptly.

The termination of a placement would take place in the following circumstances:

- Non-accidental injury to a child.
- Where the behaviour or level of care offered by a parent puts the child at serious risk of neglect or injury.
- If a sole carer became unwell and had to be admitted to hospital.

The termination of a placement would be considered and an emergency meeting called in the following circumstances:

- Where there has been an act of violence that has caused injury to any other person in the Centre.
- If a parent is found to be in the possession of illegal drugs.
- If a parent who has previously undergone a rehabilitation programme with regard to a substance addiction is found to be under the influence of such.
- Where the parent shows a lack of commitment to the placement resulting in non co-operation and disruption.
- Where a parent's own needs are too high to be met within the confines of the residential units and interfere in their direct parenting i.e. mental health.
- Where the parent fails to return to the centre at an agreed time leaving their child with staff, see unauthorised absence, such actions will be viewed as abandonment of child and alternative care arrangements for the child will need to be sought.



EQUAL OPPORTUNITIES

PROMOTING EQUALITY

RIGHTS OF THE CHILD

FAMILIES FROM MINORITY ETHNIC GROUPS

COMPLAINTS PROCEDURE



Promoting Equality

Care 2 Share serves a community that is rich in its cultural, ethnic and religious diversity. It is a fundamental aim of Care 2 Share that it provides a service to all families equally.

The diversity of the local community and of the staff and families using the services at Care 2 Share is to be celebrated. Any person, whether staff or resident, who perceives that an incident is oppressive, has the right to ask that the incident is investigated.

Staff are required to constructively challenge people who act in a discriminatory way or make discriminatory comments. Challenging such comments or behaviour can be difficult. However, any form of challenge is better than none as the absence of a challenge implies agreement with the act or statement.

Any resident who believes that a member of staff has acted in a discriminatory way should report their concerns to the Registered Manager or Deputy.

Families are encouraged to maintain and practice their religious beliefs during their placement at Care 2 Share. Staff will support residents in locating places of worship in the area and will accompany a family to a place of worship if necessary.



Rights of the Child

Care 2 Share believes that equal opportunities and the Rights of the Child are intrinsic to all aspects of its work. All staff will be trained in the use of Anti-Oppressive and Anti-Discriminatory Practice.

To this end we aim to ensure that all partners of Care 2 Share – parents, other service providers and the Placing Authority – are aware of our commitment and in whatever way possible, support Care 2 Share in its approach.

Management and staff regularly re-examine policies and practices in the light of the Rights of the Child. Specifically, the following influence policy and practice;

The Right to Freedom from Discrimination on the Grounds of Ethnic Origin, Nationality, Gender, Sexual Orientation, Belief, Disability or Social Origin

All Care 2 Share staff approach each person as an individual to be valued and respected. They are expected to work in a way which makes clear that discrimination is unacceptable and to be role models in this respect to the young people for whom they care.

Specific unacceptable behaviour includes harassment or bullying and offensive badges, slogans or jokes.

Procedures are in place to enable an individual to complain should they feel they are being discriminated against, bullied or harassed by staff or other people.

The Right to Equal Treatment

Every person at Care 2 Share has an equal right to care, support and respect. While this doesn't imply identical treatment, as each person's needs are unique and individual, it does mean that all have equal access to the support, information, care and opportunities that will best meet their wishes and needs and enable them to enjoy a good quality of life.

The Right to Freedom of Expression

People are encouraged to express opinions (unless offensive to others) and are not subject to scorn or derision. They are encouraged to adopt national or religious dress where appropriate, and to attend religious ceremonies. Religious and national events are celebrated within Care 2 Share. Staff are given training to enable them to understand different cultural traditions.

In the case of asylum seekers, isolated within a foreign country, culturally appropriate contacts will be sought and he or she will be helped to find relevant books, information and other materials.

The Right to Privacy

Care 2 Share recognises that each Resident needs a private space and personal possessions. Rooms are only entered or possessions searched, with clearly justified reasons outlined within the Care 2 Share's policy. Facilities are available for private phone calls and for meetings with family and friends (once protection regulations have been complied with).

Staff are aware that to discuss confidential matters outside the home, including personal details about the family, is a disciplinary offence. All records are confidential and kept in secure cabinets and access is only granted to persons responsible for each identifiable person within or outside the home.



Families from Minority Ethnic Groups

In planning and developing the Units' environment, Care 2 Share will be sensitive to the differing customs and traditions of all cultural groups and will work to provide appropriate facilities, opportunities and systems of support.

Specific entitlements of resident families:

- ❑ Provision of service in ways which are sensitive to the families' wishes, needs and backgrounds
- ❑ Access to support to meet specific physical needs and disabilities
- ❑ Access to support for additional communication and learning needs, such as language assistance or accessible written materials
- ❑ Encouragement to cook meals with regard to their cultural, ethnic and religious backgrounds and choices
- ❑ The recognition and positive promotion of cultural, racial, ethnic and religious expectations regarding clothes and possessions
- ❑ The opportunity to take part in activities and leisure activities that take account of their race, culture, language, religion, interests, abilities and disabilities
- ❑ The recognition and celebration of birthdays, name days cultural and religious festivals within the home setting of Care 2 Share
- ❑ Access to information about their own culture and beliefs, and on local facilities for religious observance
- ❑ A home environment in which a code of conduct makes clear that racist, sexist or homophobic comments, materials or actions are not tolerated, whether on the part of other young people, parents, visitors or staff.



Complaints Procedure

If a Resident either a parent or child has a complaint, this will be dealt with initially by the Registered Manager or Deputy Manager in line with the recommendations of The Children Act 1989/ 2004 and our own Complaints Procedure.

If an independent visitor with sufficient interest in the welfare of the parent or child, makes a complaint, this should also be dealt with by the Registered Manager or Deputy Manager.

The Registered Manager will make every effort to resolve the complaint. If the complainant remains dissatisfied, the matter may be referred to Ofsted.

Help will be provided to write down a complaint and any member of staff will be willing to help and assist. If a resident feels uncomfortable with staff helping them they will be advised to seek help from their Social Worker or an independent visitor can be provided.

A copy of "Making A Complaint Booklet" will be made available on the Units at all times and will also be individually supplied to all Residents as part of their induction package upon admission.

Care 2 Share welcomes any suggestions or complaints that you wish to make. We need your help to improve our services and ensure that we provide you with the best quality service possible. Families will be supported to access an independent advocate to assist them in making a complaint if it is felt by the parent or child that they require this service.

If your complaint is against the Registered Manager or the Responsible Individual than an external consultant (an independent person) will be appointed to investigate the complaint and will follow the timescale in stages 1- 3 as described below.

Your Right to Complain

Care 2 Share is a developing children and family organisation which provides a wide range of services including a Residential Family Assessment Centre. We want to hear from you when things are going well and you are happy with our service. But we also want to hear from you when things are not going so well and you wish to either make a complaint or make a suggestion.

Three Stage Procedure:

Stage one: Informal Stage

- If you wish to make a complaint you can speak directly to someone at the Care 2 Share office or to the Manager to inform us that you wish to make a complaint.
- Your complaint will be recorded by the Member of staff on stage one complaint form, every effort will be made to resolve the complaint quickly and make sure that you are made aware of the outcome at the earliest opportunity.
- Most problems and misunderstandings can be addressed quickly and effectively in this way. Care 2 Share staff are allowed 14 working days in which to resolve your complaint.

Stage Two: The Formal Stage

- If you are not happy with the outcome you can go to the second stage by informing the person dealing with your complaint.
- You will be given stage two Complaint form to complete.
- If you are having any difficulties in writing your complaint then please ask and assistance will be provided.
- The Registered Manager or External Consultant will:
 - Register your complaint
 - Provide you with a written acknowledgement of your complaint within two working days.
 - Appoint someone to investigate your complaint. This person will not be connected to the service you are complaining about.
 - Write to you to inform you of the outcome of your complaint. You should receive a reply within 28 working days. However, in a few complicated cases the process may take longer.
 - If there is a delay we will tell you when you can expect a full reply (normally within three months)

Stage Three

- If you are still not satisfied, you can ask for an independent review panel to be set up.
- The panel will review your complaint impartially and make sure that you are treated fairly
- You must ask for this panel within 28 days of receiving our reply on stage two investigations.
- You will need to explain why you are dissatisfied with the outcome.
- This is the last stage of the Care 2 Share complaints procedure.
- All complaints are treated with respect and confidentiality and help and support will be provided wherever needed.

Families are also encouraged to notify Ofsted of any dissatisfaction with the service they are receiving who can be contacted on 0300 123 4666

All families and young people who will be staying at the Residential Family Assessment Centre will also be provided with a copy of the Care 2 Share Residents Guide or Children's Guide which will give a user-friendly guide on how to make a complaint.



Community Based Assessments and Parenting Support Packages

Community Based Assessments

24hr Parenting Support and Monitoring Placements

Outreach/Family Support

Contact Supervision



Community Based Assessments

Care 2 Share is able to offer expectant parents or parents who already have established homes or where their child/ren are in a stable foster care placement and the risk to moving them may be felt to be too high, the opportunity to attend the unit for a community assessment with their child/ren. Community based assessments may take place at a parent's home or another venue.

Care 2 Share also offers supervised contact to parents which can be used as a means to assess and make recommendations as to whether parents should be given the opportunity to engage in either a residential or community based assessment at the unit.

Care 2 Share – 24 hr Residential Parenting Support and Monitoring Placements

We are aware that parents are often in need of support and advice to be able to live independently and safely with their child in the community. As such we are able to offer placements to both 'parents – to be' and parents with children.

In both cases risk assessments are completed and it has to be deemed that the risk can be managed within a semi-supportive environment. Where risk is thought to be significant, a referral needs to be made for a residential assessment where the level of supervision and intervention is significantly higher.

There are instances whereby parents have already been assessed but professionals have deemed it necessary that the parents still need to be monitored and supervised whilst they progress towards independence. This would be with a view to establishing whether they would be able to maintain a positive and safe environment for their children once they return to independent living.

Packages of support are tailored made to meet the needs of both the parent and their child/children.

We are able to offer tailor made packages of support for parents ranging from High to medium to low support need. Each support package prepares parents to address and develop independence skills such as budgeting, shopping, cooking and develop routines in relation to household tasks.

In relation to parenting skills, parents are supported and assisted to develop practical parenting skills by developing routines in relation to the practical care of

their children. This includes ensuring their children are registered with GPs and health visitors and attend all appointments.

Parents are advised about child development, play and stimulation and supported to be able to identify and promote safe care for their children.

All the above areas are addressed in individual key working sessions and the volume of sessions will dictate the level of support package.

All Staff are trained and aware that their priority is to monitor the safety and welfare of children or children to be. Whenever any concern in relation to child protection is identified, a meeting will be convened to assess the risk and appropriate course of action with all the professionals involved in the case. If the placement is thought to be unviable an immediate review/disruption meeting will be convened.

Care 2 Share's units are serviced by CCTV Cameras however where parents are on medium to low support packages CCTV are not used if requested.

Care 2 Share – Outreach/Family Support

Care 2 Share is able to provide bespoke packages of support to families in their homes and in the community.

This type of support is most suitable for families who are living independently in the community but due to vulnerability, specified needs and identified areas of concern or risk, the local authority require a community based support package.

The primary aim of this is supporting parents to maintain independent living with their children and monitoring of their progress and parenting skills whilst ensuring appropriate risk assessments are being carried out.

Outreach Family support can also be provided in cases where families have successfully completed a residential assessment but require a period of staff support to assist them to re-integrate into independent living and establish community and social networks and links for the future.

Outreach can also be provided in cases where parents are struggling to manage the behaviour, care and control of their children and require support with devising and implementing appropriate strategies, tools and parenting skills to maintain responsible care of their children.



Contact Supervision

Experienced and trained contact supervisors can be provided to supervise contact between parents and children in cases where children are living away from home.

Staff are trained to intervene or advise parents/children when necessary and to ensure the safety, emotional and physical wellbeing of the child during contact. This is especially relevant when there are legal proceedings taking place and supervisors have to monitor the nature of the contact and ensure appropriate boundaries are in place to prevent any breach of confidentiality or any interactions that could affect the legal proceedings.

Supervised contact can take place at our family centres or at an appropriate alternative venue.

There are 3 different types of contact we can offer; Supervised Contact with report, Supervised Contact without report and Monitoring/Escorting Contact.



FEES AND CHARGES

RESIDENTIAL PARENTING ASSESSMENTS

PAMS ASSESSMENTS

COMMUNITY BASED PARENTING ASSESSMENTS

**24HR SUPPORTED LIVING/MONITORING AND
SUPERVISION PLACEMENTS**

OUTREACH/COMMUNITY BASED FAMILY SUPPORT

CONTACT SUPERVISION

ADDITIONAL COSTS



Residential Assessments

The following fees are inclusive of Assessment care package as specified in the Statement of Purpose

Residential Packages	Weekly Fees
Single Rooms - 1 parent - 1 Child	£3,250
Family Rooms - 2 parents 1 child or one parent 2 children	£3,500

All our Residential Care Packages are inclusive of the following –

- Fully Furnished and Equipped Family Accommodation
- 24 Hour Observation using CCTV Cameras
- Supervised Escort Service for the first two weeks
- 24 hour Staffing & Supervision
- 10 hours of Child Care per week
- Comprehensive Risk Assessment by Qualified Social Workers
- Allocated Key Worker
- Individual Personal Programmes
- Supervised Activities with Family Support Workers
- 1:1 weekly counselling support provided by external resource Haven for victim of domestic violence and abuse
- Designated Health Visitors Specialising in Child Protection
- Parenting Skills Workshops



PAMS Assessments

One off bespoke fee:	Individual	£2,000
	Couple	£2,500

Community Based Parenting Assessments

Individually planned and priced based upon local authority's plan and expectations. The Fees usually range from **£6,000.00 to £12,000.00** depending upon length of assessment, number of family members involved, volume of contact/observations/meetings and other relevant factors.

Parenting Support Placements

Individually and flexibly planned in accordance with placing authority's requirements and family's needs. The basic support consists of 24hr on site staff support, monitoring and supervision. However, the broad range of support fees can be structured as follows:

High Support: Mother and Baby = **£1,800.00pw**
 Couple and Child = **£2050.00pw**

Medium Support: Mother and Baby = **£1,600.00pw**
 Couple and Child = **£1,850.00pw**

Low Support: Mother and Baby = **£1,400.00pw**
 Couple and Child = **£1,650.00pw**

Holding Placement: Mother and Baby = **£1300.00pw**
 Couple and Child = **£1550.00pw**



Outreach/Family Support

Dependent upon nature of work, distance and level of report writing required:
£35- £40 per hour

Contact Supervision

There are 3 different types of contact we can offer:

Supervised Contact with report and venue = **£40.00ph**

Supervised Contact with report (off site) = **£30.00ph**

Supervised Contact without report (Only Monitoring Contact) = **£20.00ph**



Additional Costs

The following are offered as additional services that will incur an extra charge:

- | | |
|--|-----------------|
| • 1:1 support/ monitoring | £20 an hour |
| • Waking Night Staff | £25 an hour |
| • Supervised Contact on unit with Report | £40 an hour |
| • Contact Supervisor off unit with report | £30 an hour |
| • Child Care (while parents attends activities, meetings, court) | £20 an hour |
| • Escorting Duties | £20 an hour |
| • Attendance at Court | £100.00 an hour |
| • Drug Testing | £100 a Test |
| • Parenting Assessment of non-residential parent | £250 a week |