



**PROGRESS**

**OAK COTTAGE  
STATEMENT OF PURPOSE**

**January 2019**

## **1. The range of needs of the young people that Oak Cottage provides care for and admissions criteria**

Oak Cottage is an established service consisting of two houses on a single site. Oak Cottage provides a specialist residential and preparatory home for children and young people in full time education with moderate to severe learning disabilities and complex disabilities. Oak Cottage has a focus on supporting young people to transition back home to birth/adoptive family, foster placements or adult services. The home has a history of providing high quality transitions for young people through integrated support packages working closely with families, foster carers and adult providers to ensure they have a full understanding of the child and how to support their needs. Staff works closely with the child and other professionals to stabilise behaviours, health conditions and develop independence to prepare the child for family or adult life. The home is part of an expanding residential portfolio from Progress Care, a leading childcare provider.

As part of our commitment to providing the highest quality of services, we are constantly driving to meet the targets of improved outcomes for children and young people.

Our company objectives are for all children and young people to:

- Have a safe and caring home environment
- Receive carefully planned, individual services to maximise placement stability and positive transitions
- Have support with health and education
- Be given the support and opportunities to achieve positive childhood experiences
- Progress into adulthood with an appropriate foundation of life skills to equip them towards independence

Oak Cottage will cater for short to medium term placements where clearly defined objectives and plans are in place with an aim of transitioning the child into a family environment or appropriate adult service. Long term placements will be considered if it forms part of a clearly defined placement plan. If any young person from a different local authority to Walsall is admitted or leaves the home then the RM will notify the local authority. All staff are required to follow the admission process set out in the home policies and procedures.

Oak Cottage Bungalows have been carefully adapted to provide specialist accommodation for children and young people with moderate to severe learning difficulties, behaviours that challenge, ABI, ADHD, complex health needs (please see list below)sexualised behaviours and physical disabilities.

Oak Cottage can accommodate children and young people with:

Severe learning difficulties

Profound and multiple learning difficulties

Challenging Behaviour

Sexualised Behaviours

Physical disabilities

Acquired brain injury

Sensory impairment

Complex health care needs,

The procedures detailed are taken directly from the Guidelines of the Royal College of Nursing which will be regularly checked and updated

Administering medicine in accordance with prescribed medicine in pre-measured dose via nasogastric tube, gastrostomy tube, or orally

Bolus or continuous feeds via a nasogastric tube

Bolus or continuous feeds using a pump via a gastrostomy tube

Tracheostomy care including suction using a suction catheter

Emergency change of tracheostomy tube

Oral suction with a Yanker Sucker

Injections (intramuscular or subcutaneous). These may be single dose or multiple dose devices which are pre-assembled with pre-determined amounts of medication to be administered as documented in the individual child's care plan (preloaded devices should be marked when to be administered e.g. for diabetes where the dose might be different am or pm. In many circumstances there may be two different pens, one with short-acting insulin to be administered at specified times during the day and another for administration at night with long acting insulin).

Intermittent catheterisation and catheter care

Care of Mitrofanoff

Stoma care including maintenance of patency of a stoma in an emergency situation using for example the tip of a soft foley catheter and replacement of button devices once stoma has been well established for more than 6 months and there have been no problems with the stoma <sup>[4]</sup>.

Inserting suppositories or pessaries with a pre-packaged dose of a prescribed medicine

Rectal medication with a pre-packaged dose i.e. rectal diazepam

Rectal paraldehyde which is not pre-packaged and has to be prepared – permitted on a named child basis as agreed by the child's lead medical practitioner i.e. GP or pediatrician

Administration of buccal or intra-nasal Midazolam and Hypo stat or GlucoGel

Emergency treatments covered in basic first aid training including airway management

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[4] The first time replacement must be undertaken by an appropriately qualified nurse or qualified medical practitioner

Assistance with inhalers, cartridges and nebulisers

Assistance with prescribed oxygen administration including oxygen saturation monitoring where required

Administration and care of liquid oxygen administration including filling of portable liquid oxygen cylinder from main tank

Blood Glucose monitoring as agreed by the child's lead nursing/medical practitioner i.e. GP, paediatrician or paediatric diabetes nurse specialist

Ventilation care for a child with a predictable medical condition and stable ventilation requirements (both invasive and non-invasive ventilation). NB. Stability of ventilation requirements should be determined by the child's respiratory physician and will include consideration of the predictability of the child's ventilation needs to enable the key tasks to be clearly learnt. <sup>[5]</sup>

Any of the above procedures can be undertaken with the support/training of the child's paediatrician, community nurses and medical practitioner i.e GP Once the training has taken place then staff will also have to undergo competences in certain areas to ensure that they fully understand the procedures.

Oak Cottage are working under the Guidelines of the Royal College of Nursing. This guidance was published by the Royal College of Nursing on January 2008 and their permission given for it to be included in this guidance in August 2010.

The aim is to work with children and young people to support them in all aspects of their care and to meet targets, to enable them to move into a foster placement/move back home or live independently in the community, with minimal risk of the placements breaking down.

On Admission to Oak Cottage the child's needs are assessed as part of a comprehensive matching process. Individual placement plans, behaviour management strategies and risk assessments are developed. Staff work closely with local authorities, families, fostering and adult's services to ensure a comprehensive plan is in place for each child, ensuring their needs are identified, met and that there are set targets to be achieved to enable a positive transition. The staff works very closely with the young people to achieve their maximum potential, working on: life skills, social skills, communication, confidence, self-esteem, behaviours that challenge and sexualised behaviours, ensuring that the children are treated with the dignity and respect that they deserve.

A strong emphasis is placed on children having fun and enjoying life to the fullest, with activities planned around their individual needs. We pride ourselves in maintaining relationships and working closely with new placements, foster carers/parents, and welcome ideas and involvement.

Oak Cottage will provide accommodation for up to nine children and young people (both boys and girls) from the age of 4 and up to 18 years of age or until they have completed their full time education. Oak Cottage accepts same day referrals and we can provide the maximum of one emergency placement at any one time, except in instances where a sibling group is involved. We do not accept emergency placements where invasive care is required. Once a referral has been made we will then complete a full assessment and impact assessment, to identify if the child's/ young person's need and targets can be met by the staff team.

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[5] Noyes, J and Lewis, M (2005) From Hospital to Home. Guidance on the discharge management and community support for children using long-term ventilation, Essex, Barnardos.

Young people undergo an intensive matching process and are only placed if their needs or the needs of others will not put them or others at significant risk.

Oak Cottage has a proven track record in enabling transitions young people. They have been successfully supported back to families, into foster care within our in house fostering provision, where our staff continue to support the child and foster family or into adult placements. All transitions within the home run smoothly, as the young person leads the transition, identifying to the team how they are dealing with the change. We actively support young people moving on from Oak Cottage and we will give our full support to the young person and future carers both before and after the placement, to ensure that this is successful to minimise placements breaking down once leaving Oak Cottage.

## **2. Our ethos, and the outcomes we seek for children in our care to achieve**

Our ethos is that no child need remain in a residential placement until adulthood and that through integrated, multi-agency working all children can be supported to either return to a family environment be that at home, with foster families or move into an appropriate adult placement. We encourage young people to be the best that they can be, maximise their independence and reduce dependency on others

### **Oak Cottage provides:**

- A friendly, safe and harmonious environment that is non-institutional. Promoting group living as a positive experience.
- Children with a voice enabling them to influence their own outcomes, make choices regarding their care, access local community resources, develop a local friendship groups and participate in social and leisure activities of interest to them. Ensuring that their care meets their social, cultural, emotional, religious, physical and dietary needs as they identify with them.
- Children with placement plans that identify objectives of the placement, possible transition pathways and describe how the child's social, cultural, emotional, religious, physical and dietary needs will be met incorporating the voice of the child.
- Support to children to maximise their educational experience and access relevant educational materials and communications devices, as appropriate.
- Children with a named key worker to work in partnership with the child and a range of professionals, ensuring that the child achieves their transition objective through regular communication, attendance at meetings and appointments.
- Children with the opportunity to maintain positive relationships with family, friends and previous carers as appropriate.
- Children with the opportunity to keep a treasure box and life story book/box containing information and materials significant to them.
- Children with access to the full range of medical professionals required to support their needs, contribute to their care plan and will ensure that children are referred for support which is identified as necessary.
- Children with realistic and achievable targets to maximise their independence.
- Child protection/safeguarding policies and practices that are adhered to and staff, have access to training and information on any updates, to ensure that children are properly safeguarded.

### **3. Arrangements for enabling and promoting children's enjoyment and achievement.**

Oak Cottage is committed to encouraging all children actively participate in social and leisure activities as part of our service provision. These must be culturally appropriate, meeting individual needs. Staff will advocate for children to be able to access all facilities and activities in a manner that suits their needs.

All Young people at the home have access to a wide range of local resources within their community. These include youth clubs, discos, visiting restaurants, shopping, parks, theme parks, swimming, cinema, pantomimes, football clubs, scouts and guides, horse riding, bowling and any individual skill or talent that the young person shows an interest in.

Trips and activities are planned with each child individually allowing for personal preference. At Oak Cottage we have strong links with local groups, leisure centres and youth centres that complement our approach to structured multi agency working, and young people are encouraged and supported to get involved with activities and local organisations to give them a sense of the local community and what it means to them.

Oak Cottage has access to its own transport, however where appropriate the company will seek to access mobility allowance ensuring that young people have the transport they are entitled to. The young people are also encouraged to access public transport or walk to local facilities with the support of staff.

All the young people are supported and encouraged to attend education and we strive to work very closely with the young person's school to ensure consistency, boundaries and good communication. All young people are encouraged to bring work home and staff will support this.

The staff team take pride in supporting children and young people in accessing events that take place within local authorities, community or the school and staff/key workers will support parents evening /plays/sport days.

### **4. Our arrangements for supporting the cultural, linguistic and religious needs of children living at Oak Cottage**

At Oak Cottage we respect all religious denominations. Children are encouraged to practice their religious beliefs, staff will ensure appropriate arrangements are made to ensure the child has the opportunity to attend places of worship or religious events if requested.

The home follows the cultural and religious rituals in preparation of food for children as needed. At Oak Cottage the young people are encouraged to participate in cultural nights, birthday celebrations and any other significant events that occur during the year to learn about other cultures and religions.

The home and company has a diverse staff team from a range of socio-cultural and religious backgrounds. Where possible we aim to be able to support young people's linguistic needs and if needed second staff from other areas of the business to support the young person to communicate and staff to learn to communicate with them.

Staff are experienced in utilising a range of alternative communication techniques such as Makaton, SSE, PECS, Object reference, responses etc.

## **5. Arrangements for promoting contact between children and their family and friends**

We encourage and promote contact with the child's parents, carers or significant others to be maintained as deemed appropriate. This is agreed with placing authority and outlined in the placement plan. We encourage all forms of contact including telephone calls, video chat, letter writing, photo albums, postcards, celebratory cards etc.

Oak Cottage has an open door to parents and professionals who may visit or call at any reasonable hour, we advise visitors to call in advance if not expected, to ensure someone is home as we encourage the children to get out as much as possible.

We seek the guidance of the placing authority on any contact that is not prohibited, and will require a copy of any court orders etc.

Oak Cottage will not be able to support supervised contact at the home due to disruption this may cause other children and to maintain the child involved dignity; therefore alternative sites may be arranged should this be necessary.

## **6. Our approach to consulting children about the quality of their care**

It is important that the views and wishes of the children and young people are taken into account as much as possible. For those children with severe and profound learning difficulties, the staff will establish the young person's likes and dislikes through observation, and use of communication boards, PECS, Makaton, Big Mac Buttons, objects of reference, responses and discussion with significant people who may advocate on their behalf to ensure that their views are heard.

Children's Views are taken on matters such as:

- Views in relation to their care
- Activities
- Planning for changes in the home- decorating etc.
- Menu planning
- Party planning
- New staff
- Contact

All children are encouraged to participate in young people's meetings. Children are encouraged to set the agenda to express their wishes, and children may invite independent visitors or representatives to assist them. The use of advocates is important within the service and all children without appropriate representation will be found an advocate.

The home aims to empower all children so that they are able to voice their opinions, make choices and address any issues that may affect them; they are encouraged to discuss relationships and forward planning for future placements. Our children's thoughts are used to influence their life and well-being in the home environment. The children will also have 1-1 sessions with staff to ensure that their views are

taken into account with any decisions made around their lives, they also influence their behaviour strategies and independence targets.

Progress also undertakes quarterly Quality Assurance Surveys for all young people as well as providing quarterly quality assurance visits where young people will have the opportunity to speak with the Quality Assurance Officer. Young people from each service are empowered and supported to attend young person's council meetings to influence the company and plan events.

All staff at the home are consulted on any new developments and are encouraged to make suggestions and contribute towards the development of our service delivery.

## **7. Our policy and approach to (a) anti-discriminatory practice in respect of children and their families and (b) children's rights**

Progress Care are committed to operating an anti-discriminatory policy. We accept the importance of challenging discrimination and of transforming social care practice in directions, which promote people's welfare and empowers children, families and staff.

Anti-discriminatory practice is the responsibility of all of our employees. Progress Care and its' employees must act to establish anti-discriminatory practice focused on transforming imbalanced social relationships that may occur between different ethnic, social and minority groups into ones of greater equality.

We aim to have a staff team that reflects the diversity within contemporary society. Whilst it is impossible to legislate for people's personal opinion, we have an expectation that they will conform to this policy and all other policies whilst on duty.

We believe that the relationships formed with the young people, colleagues and other professionals should give all parties opinions equal consideration. The home operates from a child centred perspective where the welfare of the child is paramount and the young person's views are always listened to. Where problems arise from different levels of responsibility, and consequent unequal power balance between young people and those caring for them is perceived it is important to explain to young people why it may not be possible to meet their wishes.

At Oak Cottage we will support young people to maintain a positive sense of self by:

- Challenging discrimination in any manifestation and to positively promote individuality and diversity.
- Positively promoting the young person's religion through observance, or attendance at places of worship.
- Encouraging young people to decorate their personal bedroom space and to choose their own clothes and personal items
- Supporting children to prepare food that reflects their background
- Encouraging expression of individuality and active engagement within the community by supporting young people to access activities and maintain hobbies or interests
- Providing children with regular 1-1 sessions and young people's meetings
- Ensuring young people have access to communication with children's rights services, their IRO and Ofsted



- Recognising that all children regardless of ethnicity or disability etc. have individual care needs.
- Providing young people with advice, assistance and support to look at issues surrounding their particular experiences and backgrounds.
- Provide training and support to staff around Equality and Diversity
- Ensure a full sense of a young person's identity is received during the referrals/admissions process

Oak Cottage can access Unicef on the child's behalf for further information on the children's rights.

## **8. Accommodation offered by Oak Cottage**

Oak Cottage consists of 2 bungalows on the same site both of which have been carefully adapted to provide specialist accommodation for children and young people with severe learning and physical disabilities, sensory impairment, ABI and complex health care needs. Previously a private residence, the home has undergone a major refurbishment to comply with appropriate and relevant legislation.

The front bungalow comprises of five bedrooms. Four bedrooms are situated on the ground floor. The fifth is located on the first floor and is accessed by the stairs. The ground floor bedrooms are all suitable for wheelchair usage and have hoisting equipment and profiling beds. On the ground floor are a spacious lounge/ dining room which allows for wheelchair access to the rear of the property into the private, mature garden. There is a separate bathroom and a wet room, complete with hoisting equipment and aids for children with physical disabilities. There is a large kitchen where young people are encouraged to develop independence skills and gain sensory experience.

The rear bungalow comprises of four ground floor bedrooms, all have en-suite bathrooms and aids for children with physical disabilities available if required and the bedrooms are all suitable for wheelchair use. There is a lounge/dining room, which leads out onto our garden area. Here the children have access to the play area, swings, trampoline, toys and sandpit. There is also a sensory room where children can have time out or engage in their individual sensory diet and a kitchen where children are encouraged to develop their independence skills.

Sited between both bungalows is the cabin, which houses a den area with sofa, TV and tables allowing young people a quiet space to relax on their own or with friends and family, a small sensory room and an arts and crafts storage area.

The homes are well decorated throughout with colour schemes and furnishings designed to suit the needs of the children accommodated.

## **9. The location of Oak Cottage**

Oak Cottage is situated in Walsall Wood on the outskirts of Walsall Borough bordering on Cannock, Staffordshire and Lichfield. The area is predominantly residential, close to recreational and leisure facilities

and within walking distance of Brownhills town centre. There is a range of special schools within a 5-mile radius.

There is excellent access to public transport linking Sutton Coldfield, Lichfield, Cannock, Walsall, Wolverhampton and Birmingham.

## **10. Our policies for safeguarding children, preventing bullying and children who go missing**

Progress has detailed policies around safeguarding, bullying and missing children. Safeguarding procedures form an integral part of the daily responsibilities of staff in respect of protecting children. All children must feel safe and secure. Staff are required to report any disclosure or any form of abuse to the Registered Manager immediately.

All staff will receive appropriate local authority safeguarding training. Safeguarding training is scheduled every three years it will be refreshed sooner if there are significant events resulting in updated legislation, changes to policy or where there are concerns over staff practice.

All children must have in place an individual risk assessment prior to placement and this is reviewed on a regular basis. The Registered Manager of the home monitors this.

Any form of allegation against a member of staff must be reported to the Registered Manager who is responsible for informing the appropriate authority for investigation. Staff are required to report any allegation of abuse relating to the Registered Manager to the child's placing authority and the Managing Director Claire Rogers or Regional Residential Operations Manager Tyrell Simpson who are the Designated Safeguarding Officers. They will report the matter to the Local Authority Designated Officer and the Managing Director/Responsible individual. Regional Residential Manager Tyrell Simpson is also the lead in Child Sexual Exploitation, Mental Capacity and Deprivation of Liberty and Prevent for Residential Services. A member of the senior management team is on call at all times, and their contact details are available in each home. The Manager/Senior Manager will ensure information and support is made available to the staff concerned, should this be necessary.

All incidents of safeguarding, child protection allegations will be reported to OFSTED under Regulation 40 in line with the new Quality Standards and Regulations April 2015. Any staff member, whom an allegation is made against, may be suspended from duty pending further investigation. The Manager/Senior Manager will ensure information and support is available to the staff concerned in this event, communication will come via the HR department.

No form of bullying is acceptable within the home. Incidents of bullying from the child or staff must be reported to the Manager. All staff must refer to the homes policy and procedures on bullying for their

guidance. All young people receive 1:1 meetings on bullying, and have signed an anti-bullying agreement where deemed appropriate.

If a young person goes absent without permission, as outlined within their individual risk assessments, the Manager, parents and placing authority will be notified and the matter referred to the police immediately as this would raise concerns from the safety of the children due to the vulnerable nature of their disabilities. All reasonable effort will be made by Residential Support Workers to locate the young person. Records are held at the home of the young people absent without permission and are available for inspection.

## **11. Our arrangements for dealing with complaints**

We welcome any form of comments, complaints or suggestions that will enable us to reflect on our working practices and enhance the development of our services.

At Oak Cottage we have an appropriate complaints procedure that staff will follow should this be necessary this is briefly detailed below.

A self-explanatory complaints leaflet is available to all at request through staff/Manager or head office. Any initial complaints should be made informally to staff or the Manager; we will endeavour to resolve most complaints at this stage. If the matter is unresolved, complaints should be made in writing to the Manager. The Manager will acknowledge receipt of this within 3 working days. They will then conduct an investigation into his and meet with the complainant. A written response to the complaint will be sent to the complainant within 25 working days. The complainant may then appeal against this within 20 working days to the Director of Operations who will instruct an independent investigator. The complainant will receive notification that this has been done within 5 days. A formal response to this will be made to the complainant within 30 working days.

The responsible authority will monitor all complaints made against the home. A complaints log is available at the home.

If any complaint which is made has not been handled satisfactorily, please contact Ofsted at this address:

OFSTED

Piccadilly Gate, Store Street

Manchester, M1 2WD

Tel: 03001231231

[Enquiries@ofsted.gov.uk](mailto:Enquiries@ofsted.gov.uk)

## **12. Our approach to surveillance and monitoring of children**

Due to the nature of the children being looked after at Oak Cottage it is, on occasions, necessary to use a monitor in the bedroom e.g. Seizure mats or cameras for epileptic young people to safeguard from any potential health risks, enable independence and improve quality of life, by reducing the need to disturb young people during the night time. This will be identified and recorded in the young person's placement plan and will be in agreement with placing authority and parents/carers where necessary.

### **13. Our approach to Behavioural support**

Progress Care train all staff in safe and positive behaviour management who work with young people who display behaviours that challenge, which includes the use of safe holding procedures on the children and young people. We take a proactive stance on the management of behaviours and safe holding procedures are viewed as an extreme measure and only used as a last resort. Progress staff receive training around attachment issues, childhood trauma and recovery. Young people will receive any additional medical or psychological support required to help them to overcome any issues and regulate their behaviour.

Oak Cottage has a clear behaviour support policy and procedure for supporting children's behavioural needs. There is a strong emphasis on positive attention from staff, demonstrating a caring interest and building strong, positive relationships with children.

Due to the varied disabilities of our children and young people, the use of safe holding procedures is not widely necessary. Staff always considers the use of alternative behaviour management strategies based on the child's level of understanding, before resorting to the use of any form of physical contact. Positive reinforcement is used to influence individual behaviours; this can be as simple as recognising and praising positive actions through the use of reward charts and informal interaction, as a result sanctions are rarely used. Any strategies authorised for use are evidenced in the child's Placement Plan in the section pertaining to behaviour management strategies, this section outlines the behaviours exhibited by the child and the response that staff should give to the child to ensure consistency of approach.

Staff are encouraged to discuss the behaviour management strategies and ideas on enabling children to self-regulate as part of the care planning meetings, where ideas and opinions are shared and agreements made to adjustment to the plans for children's care. Parents and professionals are encouraged to actively participate in the care planning processes by attendance or feedback via the key worker.

Progress Care use PRICE Training who is accredited by BILD. Staff undertake a rigorous 3 day behaviour management training programme which assesses of competence in:

- Proactive behaviour management
- The use of the safe holds
- Deflection
- Understanding of underpinning legislation
- Recording incidents

This is followed-up with annual refresher which consists of 2 days. The Trainers provide a consultation service as and when necessary.

Any placement of a child that may require the use of safe holding procedures must be discussed with the placing authority and parent/carer. The proposed procedures will be appropriate to the individual and outlined and agreed in the Placement Plan. Staff will undergo any necessary additional training in the use of these specific interventions. The use of all interventions will be recorded, monitored and regularly reviewed by the Manager. The manager will ensure all physical interventions and sanctions are clearly recorded and evaluated on their effectiveness. All staff are required to follow the homes policies and procedures for guidance.

## **14. Our contact details**

Our Chief Executive Officer of Progress Children's Services/Registered Provider, Mrs Bal. Dhanoa, is a qualified senior social work practitioner B.A (Hons), Dip SW/DipHE. Bal has over thirty years' experience of working within statutory, voluntary and independent sector at various levels as senior practitioner, management, consultancy and training, predominantly with children and families, domestic violence, youth work, fostering and shared care, specialising in work with disabled children and adults.

Our Managing Director/Responsible Individual, Mrs. Claire Rogers, is a former Registered Manager within Progress and is qualified to NVQ 4 in Care and Management and has completed the Diploma in Management (MCMI). ILM 7 and has undertaken the IOD director development programme Claire has eighteen years' experience in working with children and young people with disabilities and young people with learning difficulties, communication disorders, challenging behaviours and sensory impairment.

The Registered Manager is supported and supervised by Tyrell Simpson who is the Regional Residential Operations Manager. Tyrell Simpson has worked for several local authorities Staffordshire County Council, Birmingham City Council, Wolverhampton City Council and most recently worked for Rotherham Metropolitan Borough Council implementing change within both Residential services and the Leaving Care service acting in the role of Residential Improvement Consultant. Tyrell's qualifications are ILM Level 5 Certificate in Action Learning Facilitation. Preparing to Teach in the Lifelong Learning Sector BTEC Level 4. Practice Teacher Award Staffordshire & Keele University. Diploma Social Work/Diploma Higher Education Staffordshire University.

All the senior managers can be contacted at the company head office, which is based at: 127 Millfields Road, Bilston Wolverhampton WV4 6JG

Tel: 01902 561066

Email: [CRogers@progresscare.co.uk](mailto:CRogers@progresscare.co.uk)

[TSimpson@progresscare.co.uk](mailto:TSimpson@progresscare.co.uk)

## **15. Provision to support children with Special Educational Needs**

If any of our young people have a statement of educational needs or an Education, Health and Care Plan, this will be kept on file and will have a school name in their statement. Support will be delivered as for any young person, as detailed below.

## **16. The promotion of children's education**

Each young person being looked after is expected to have in place a Personal Education Plan or EHC Plan. In addition all young people must have pathway plans and transition plans in place from the age of 15/16. Young people have access to a computer and any other essentials equipment deemed necessary to enhance their educational achievements. Oak Cottage works closely with education and a multi- agency team to identify and support all the individuals' needs.

Key workers will support each young person in all aspects of their educational needs, which is monitored by the Registered Manager. A key worker or named person at Oak Cottage will establish home school liaison, a daily diary process to develop effective communication with school and attend relevant meetings as necessary.

The Key worker will go into school at least once every term unless more involvement is required to discuss the child or young person's achievements and to discuss and consult over matters such as communication systems, behaviour management strategies, care routines etc. to ensure a consistent approach is taken between the home and school. The Key worker will attend all parent's evenings when deemed appropriate (if there is no parent involvement).

## **17. Provision of health care and therapy**

Managing the health needs of the children at Oak Cottage forms a significant part of the service that we provide and are firmly committed to meeting the very unique and individual health care needs of our children.

- All children will be registered with a GP, Dentist and Optician and have their health reviewed regularly and routinely
- Where children have seen specialist consultants for their condition and are deemed to know the child well, we aim to maintain consistency in this area, due to the complex nature of the children for whom we care, and in order to provide the best possible access to clinical expertise and support.
- We aim to ensure that children get the best possible 'local' services to meet their complex needs and have access to regular reviews of any specialist equipment that they need locally, such as wheelchairs, splints, sleep systems etc.
- That high attention to detail, competence and confidence is demonstrated by our staff in managing the complex health needs of our children.
- We aim to promote the child to take responsibility where possible for their own health

- Independence to be maximised through the use of adaptations and equipment
- To be supported with or provide access to services on their emotional and mental health
- Oak Cottage has built a good relationship with the clinical commissioning groups and they provide training to the Oak Cottage Team individual to each young person's needs.
- The Community Nurse will come into the home and complete competencies on all staff to ensure that they are aware of all the individual medical needs of the young person are being met i.e. PEG feed, administering of medication via the PEG, dressings and will help and support with dieticians.
- The Community Nurse will help and compile the Continuing Care Plan to ensure that the same plan is being followed in the home and at school
- Promoting choice at mealtimes, thus empowering their food preference and when they would like to eat their meal
- All young people are encouraged to participate to follow a healthy lifestyle through activities and diet
- Personal care is maintained to a high standard and promoted to encourage independence
- Two highly trained members of staff witness and sign the administration of all children and young people's medication
- Oak Cottage staff looks at alternative and healthy ways to identify and promote the wellbeing of each individual child, before resorting to prescribed medication

Due to the nature of the children being looked after at Oak Cottage it is sometimes necessary to use different types of monitor in the bedroom of the young people, in circumstances where children have epilepsy severe asthma, sleep apnoea etc., to safeguard from any potential health risks. This will be identified and where consent is issued this will be recorded in the child's placement plan in agreement with placing authority or parents/carers where necessary.

We as a staff team are very committed to meeting the individual health care needs of children for young people with complex health needs placed from out of area; it will be the responsibility of the placing authority, to refer the young person to any specialist services they may require whilst in our care. Detailed guidance and necessary consents for any invasive care procedures must also be provided. The manager will put the relevant people in touch with the clinical commissioning groups in order to make the necessary agreements, with regards to the funding of the health care needs for any child who has identified significant health care requirements.

Where children have complex health care needs, the Manager in conjunction with appropriate Health staff will ensure that all staff are adequately trained to perform any complex care, including, where appropriate, invasive care procedures. Once in placement, an appropriately qualified healthcare professional will undertake any necessary training with the staff. As well as, undertake assessments based on local competencies during their direct involvement with the young person. The manager will ensure that this is completed as soon as is practical, and that all the staff trained will be deemed competent by the said health care professional.

Progress can offer sensory therapies such as aromatherapy, counselling and advocacy support, external consultants. Additional training for the staff team is available and sought as and when required, for example bereavement training which was accessed in the past. Each young person will have access to their own advocate if deemed appropriate.

Psychotherapy and other specialist input such as occupational therapy, physiotherapy could be arranged and agreed with the responsible local authority. All staff providing therapeutic support will undergo the normal vetting procedures, will be suitably qualified to undertake such treatments and will undergo supervision by a reputable practitioner.

The placing authority is to be responsible for the funding of all health care needs and costs incurred by Walsall CCG. This must be confirmed in writing to the Manager by the first statutory review. (Amendment to annex c of the responsible commissioner Guidance: extract for guidance on determining the responsible commissioner – looked after children).

The Registered Manager will monitor and supervise staff accordingly. All young people's health will be monitored by regulation 44 and 45 reports and clear recording within the Placement Plans.

Menus are adapted with the help of the young people to suit individuals taking into consideration specialist diets.

## **18. Management, staffing structure, experience and qualifications and arrangements for supervision**

The Registered Manager of the home is Margaret Hopkins who has NVQ 4 Care and Management. Margaret has worked over 16 years for Progress and 13 years working in the management team for the company. During this time she has developed her experience in working with children with learning and physical disabilities, sensory impairment, complex needs, Autistic Spectrum Disorder, Epilepsy, ABI and behaviours that challenge. In addition, Margaret has significant experience in working with looked after children during her long career as a Foster Carer.

The home is supported by 3 Team Leaders Lorrain Gibbons, Stacey Sheldon & Aga Zolna and a core staff team.

Lorrain Gibbons has a GNVQ Advanced in Health and Social Care and Level 5 in Management. Lorrain has over 11 years' experience working with children and young people with emotional, behavioural difficulties, attachment disorders, learning disabilities, epilepsy, ABI, autism and sexualised behaviours.

Stacey Sheldon has 11 years' experience working with children and young people with emotional, behaviours that challenge, autism, mental health, ABI, sexualised behaviour and attachment disorders. Stacey Sheldon has NVQ 2 and 3 in health and social care in children's and working towards level 3 in management.

Aga Zolna has worked in social care for 12 years and has experience with mental health, autism, severe disabilities, behavioural difficulties, attachment disorders, learning disabilities, ABI and sexualised behaviour. Aga Zolna has NVQ 2 and 3 in Health and Social Care in Children's and Adults, Learning Disabilities level 3 and Aga is working towards level 3 in management.

The core staffing in the home is provided on a 1:2 basis however many children accommodated will require higher staffing ratios which will be determined through their placement agreement. All staff undergo a



rigorous recruitment process conducted by our HR team who all undergo Safe Recruitment training, all staff must have clearance of DBS checks, health and references prior to appointment.

Health and Safety is managed day to day through the homes Health & Safety Officer, audits and compliance is overseen by an external contractor who has key responsibility to ensure all relevant legislation and regulations in relation to and health and safety are met and updated. Progress's Quality Assurance and Compliance Officer will also oversee this with regular checks and visits. Quarterly health & Safety meetings are held across the business, to share best practise, identify trends and patterns and ensure continuous improvement.

There is a maintenance team that support Oak Cottage as and when required, they also offer an emergency support call out.

Progress are firmly committed training and development of staff; recognising the essential need for staff to have access to resources and materials that allows them to adapt to the changing environments within the child care sector. All staff:

- Are required to adhere to the organisational policy and practice in respect of staff recruitment, supervision, training and development programme.
- Receive regular supervision by the Team Leaders/Manager and a record of all supervision meetings is kept in their individual electronic file.
- Receive a structured induction programme for a maximum of two weeks where focus and observation is placed on practise and policies.
- Are required to undertake core training within their 6-monthly probationary period, during this period they have fortnightly supervision this reduces to regular ones thereafter.
- Participate in annual appraisals to monitor their performance and career development.
- Have individual training and development portfolios and are required to attend all internal and external training.
- Are required to achieve their QCF level 3 within 2 years of starting a career in child care
- Receive any necessary training in order to fulfil their roles in supporting the young people fulfil their roles in supporting the young people

## Staffing Structure – Oak Cottage Schedule 1.19

Title	Name	Qualifications	Hours
Chief Executive Officer	Bal Dhanoa	B A Hon DipW/Dips HE	Full Time
Managing Director/Responsible individual	Claire Rogers	NVQ Level 4 Care & Management – Diploma in Management  Level 5 Leadership and Management Diploma in Management FMCMI ILM 7 strategic management Cert IOD	Full Time
Regional Operations Manager	Tyrell Simpson	ILM Level 5 Certificate in Action Learning Facilitation. Preparing to Teach in the Lifelong Learning Sector BTEC Level 4. Practice Teacher Award Staffordshire & Keele University.  Diploma Social Work/Diploma Higher Education Staffordshire University	Full Time
Home Manager	Margaret Hopkins	NVQ 4 & NVQ 4 Care and Management	Full Time
Team Leaders	Lorrain Gibbons	GNVQ Advanced in Health and Social Care and Level 5 in Management	Full Time
	Stacey Sheldon	NVQ 3 in CCYP Completed level 3 in Leadership & Management	Full Time
	Aga Zolna	QCF Level 3 in CCYP Completed level 3 in Leadership & Management	Full Time
Residential Support Workers	Beverley Ware	QCF Level 3 Diploma in CCYP	Full Time
	Anthony Marsden	QCF Level 3 Diploma in CCYP, Level 2 in Team Leading	Full Time
	Rhianna Gill	QCF Level 3 Diploma in CCYP	Annualised
	Aga Detlaf	QCF Level 3 Diploma in CCYP	Annualised
	Katrina Krupski	QCF Level 3	Part Time

	Rosie Hughes	BA HONS in Family and Community Studies	Full Time
	Sarah Reynolds	QCF level 3 Diploma in Health and Social care in Children	Full Time
	Jess Foulkes	BTEC level 3 in Child Care	Full Time
	Deana Powis	QCF Level 3 in Health and Social Care	Full Time
	Zihlobo Vundhla	In Probation	Full Time
	Ashley Hall	NVQ Level 3 in childcare In probation	Full Time
	Selene Austin	BTEC level 3 in Health and Social Care	Annualised
	Cynthia Litchfield	QCF Level 3 in adults and children Completed level 2 in team leading	Full Time
	Jade Cope	In Probation	Full Time
Night Care Workers	Angelah Smith	QCF Level 3 Diploma in CCYP	Full Time
	Vacant Post		
	Vacant Post		
	Lida Simwanja	NVQ 3 in CCYP	Full Time
	Sabu George	NVQ 3 in CCYP	Full Time
	Shorai Takaedza	QCF level 3 in Health and Social in Children's	Full Time
Cook	Vacant Post		

## 19. Appropriate role models from a mixed staff group

Oak Cottage has a varied staff team of both genders, of different ages and many different cultures. Young people are matched with staff for suitable key workers who will act as a positive role model for that young person. We aim to provide a caring, homely and safe environment where the young people can progress in all aspects of their lives.

Version	Author	Date	Description
1.1	Claire Haynes and Sarah Wright	January 2013	Final Copy
1.2	Margaret Hopkins	July 2013	Updated
1.3	Claire Haynes and Margaret Hopkins	October 2013	Up dated staffing list, age criteria and contact details
1.4	Margaret Hopkins	December 2013	Up dated staffing list

1.5	Margaret Hopkins & Dean Smith	April 2014	Up dated to meet amendments to the Children's regulations.
1.6	Margaret Hopkins & Dean Smith	June 2014	Up dated to meet amendments to the Children's regulations.
1.7	Margaret Hopkins & Dean Smith	December 2014	Up dated to meet amendments to the Children's regulations.
1.8	Margaret Hopkins	May 2015	Up dated to meet the new Quality Standards and Regulations April 2015
1.9	Margaret Hopkins	June 2015	Up dated staffing, Deputy and Senior
2.0	Dean Smith	Sept 2015	Updated due to staffing changes
2.1	Margaret Hopkins	Feb 2016	Updated due to staffing changes and staffs qualifications
2.2	Margaret Hopkins	March 2016	Updated due to staffing changes and staffs qualifications
2.3	Margaret Hopkins	August 2016	Updated due to staffing changes and staffs qualifications
2.4	Margaret Hopkins	September 2016	Updated due to staff changes and responsibilities
2.5	Margaret Hopkins	October 2016	Update staffing
2.6	Vanessa Griffin	April 2017	Updated to combine shire and oak SOPs
2.7	Lorrain Gibbons	June 2017	Update SOP in management structure also age range.
2.8	Lorrain Gibbons	August 2017	Update SOP in management structure
2.9	Margaret Hopkins	February 2018	Update SOP staff changes
3.0	Lorrain Gibbons	April 2018	Update SOP staff changes
3.1	Margaret Hopkins	June 2018	Update SOP staff changes
3.2	Margaret Hopkins	July 2018	Update SOP staff changes
3.3	Margaret Hopkins	September 2018	Update SOP staff changes and qualifications
3.4	Margaret Hopkins	December 2018	Update SOP staff changes and qualifications Updated criteria for referral's into Oak
3.5	Margaret Hopkins	January 2019	Update SOP staff changes and qualifications