

# ERA CARE LTD



**STATEMENT OF PURPOSE FOR:**

**The Marshes**

Updated on 03.04.2018

## CONTENTS

		Page
1	A statement of the range of needs of the children for whom it is intended that the children's home is to provide care and accommodation.	4
2	Details of the home's ethos, the outcomes that the home seeks to achieve and its approach to achieving them.	4
3	A description of the accommodation offered by the home, including: (a) how accommodation has been adapted to the needs of children; (b) the age range, number and sex of children for whom it is intended that accommodation is to be provided (c) the type of accommodation, including sleeping accommodation.	7
4	A description of the location of the home.	8
5	The arrangements for supporting the cultural, linguistic and religious needs of children.	8
6	Details of who to contact if a person has a complaint about the home and how that person can access the home's complaints policy.	9
7	Details of how a person, body or organisation involved in the care or protection of a child can access the home's child protection policies or the behaviour management plan.	11
8	A description of the home's policy and approach to consulting children about the quality of their care.	11
9	A description of the home's policy and approach in relation to – (a) anti-discriminatory practice in respect of children and their families (b) children's rights	12
10	Details of provision to support children with special needs	15
11	If the home is registered as a school, details of the curriculum provided by the home and the management and structure of the arrangements for education	15
12	If the home is not registered as a school, the arrangements for children to attend local schools and the provision made by the home to promote children's educational achievement	15
13	The arrangements for enabling children to take part in and benefit from a variety of activities that meet their needs and develop and reflect their creative, intellectual, physical and social interests and skills.	17
14	Details of any healthcare or therapy provided, including – (a) details of the qualifications and professional supervision of the staff involved in providing any healthcare or therapy (b) information about how the effectiveness of any healthcare or therapy provided is measured, the evidence demonstrating its effectiveness and details of how the information or the evidence can be accessed.	18
15	The arrangements for promoting contact between children and their families and friends	19
16	A description of the home's approach to the monitoring and surveillance of children	21
17	Details of the homes approach to behavioural support including information about – (a) the homes approach to restraint in relation to children (b) how persons working in the home are trained in restraint and how their competence is assessed.	22
18	The name and work address of – (a) the registered provider	26

---

	(b)the responsible individual (if one is nominated) (c)the registered manager (if one is appointed)	
19	Details of the experience and qualifications of staff, including any staff commissioned to provide education or healthcare	27
20	Details of the management and staffing structure of home, including arrangements for the professional supervision of staff, including staff that provide education or healthcare	24
21	If the staff are all of one sex, or mainly of one sex, a description of how the home promotes appropriate role models of both sexes	25
22	Any criteria used for the admission of children to the home, including any policies and procedures for emergency admission.	25

**This Statement of Purpose was updated in May 2015 in line with the Children’s Homes Regulations 2015.**

---

## Quality and purpose of care

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

The Marshes is registered and provides three bedrooms for young people of either sex with emotional and/or behavioural difficulties. The home is unable to meet the needs of young people with severe physical disabilities or young people who require intensive nursing care. However, the home is able to meet the needs of young people with mild forms of physical disabilities, mild learning difficulties or mild mental health problems as long as the young person's disabilities, difficulties or problems are secondary needs over and above their emotional and behavioural difficulties. The severity of such needs would be initially assessed during the referral process in order to establish whether the home can meet such needs. ERA Care's robust training program does contain a number of training courses that would enable the home to meet such needs. In the event of this not being the case the referral would not be accepted unless the referral was planned well in advance to enable staff to have the required training qualifications.

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

The home is committed to providing services that are considerate and sensitive to the individual young person, their families, local authorities and all sections of the community. It is the responsibility of all staff to work to achieve this within ERA Care's ethos of service, quality and partnership. Partnership means demonstrating a commitment to close co-operation with colleagues, service users, placing authorities and families.

The basis of our work reflects the belief that every young person has the right to be treated as an individual. Each individual has the right to have their needs met within an environment that respects each individual and promotes independence.

Young people in our care are entitled to have high expectations of the care they will receive, and are entitled to expect that their needs will be met. These needs include; clear guidance on expectations as well as sympathy and understanding.

From a base of providing a warm, safe, secure environment, where a young person is treated with respect and dignity within boundaries, we aim to adopt a holistic approach of providing a positive service to the young people we care for.

The service aims to be one that is inclusive and develops a realistic approach to the issues of everyday life. We work in partnership with other professionals to meet the emotional, psychological and health needs of young people.

---

*Care philosophy (Every Child Matters outcomes)*

Our purpose is to provide a high standard of quality accommodation in a small residential home for young people "looked after" by local authorities, who are unable to live with their families, by way of providing a structured and positive residential experience so that they can continue their normal routines i.e. attend school, and keep appointments etc. The service aims to be one that is inclusive and develops a realistic approach to the issues of everyday life. We work in partnership with other professionals to meet the emotional, psychological, health and future needs of young people.

The home works positively towards Every Child Matters outcomes in all aspects of care for young people. These outcomes are:

**Staying Safe** It is paramount that ERA Care keeps all children safe from all forms of harm. Era Care has a robust recruitment policy which ensures that all relevant checks such as DBS checks, references, past employment history etc are obtained to establish that people are suitable to work with children. All staff receive training courses to enable them to comply with all ERA Care policies and procedures and government legislation. Such training includes Safeguarding, Anti Bullying, Child Sexual Exploitation, Understanding Behaviour, Drug and Alcohol Awareness, Hidden Harm, Pathways to Extremism, to name a few. Further training ensures children's safety within the home. Such training includes, First Aid, Food Hygiene, Fire Procedures, Health and Safety, Physical Intervention Training etc. All ERA Care homes are closely monitored by upper management and directors to ensure that appropriate practices, risk assessments and individual care plans are suitable for the needs of the individual children.

**Being Healthy** Although the home will initially be directly responsible for ensuring the good health and healthy lifestyles of children, this will adapt as the child is able to gradually respond and contribute appropriately to helping to promote their own physical, mental, emotional and sexual health as well as participation in sport and exercise for which the home will provide the required resources for choices in such matters. Supported by their key worker/other staff at the home/outside health care agencies if required, they will also be helped to combat personal stress and obtain self esteem as well as an ability to recognise the importance of the avoidance of drug taking including smoking and alcohol. The members of staff involved in such work will be supervised and given the support, training and required resources. Each individual child will be registered ASAP after the admission to the home with a local GP, dentist and optician.

**Enjoying and achieving** This outcome includes ensuring that, not only do children attend education and training etc, but that they also enjoy it and understand the importance of it for their future. The home will monitor the

---

---

achievements and shortfalls in such matters and will actively support children through key worker sessions, and individual 1-1 sessions with the young people, etc. This will be increased with those with poor school attendance or more challenging behavior. Staff will also support the young people in attending meetings such as school PEP meetings and will seek and encourage the young people to actively participate at a level that suits them. The home will also be proactive in researching and applying for college courses, possible apprenticeships, work experience placements etc tailored to the needs and aspirations of the child.

The outcome also extends out to the effectiveness of the home promoting social, recreational, cultural and sporting activities as well as holidays, all of which will be done in consultation with the child/young person, the parents (where appropriate), the social worker and significant others when required.

**Achieving Economic well-being** It is recognised that this outcome is the ultimate aim and responsibility of the home; ie to impart on young people the skills and knowledge needed for employment/further education leading to economical independent living, whilst it is of course seen as a given that this encompasses all of the other 4 outcomes. It is seen as essential that such preparations to give the best life chances for children after care are started as early as possible, perhaps for instance, initially giving younger children incentives to complete household chores etc. A pathway plan will be drawn up before a child's sixteenth birthday. Although this is ultimately the responsibilities of the Social Worker, the home will actively, through e-mails, remind the social worker of this responsibility and work in collaboration with the Social Worker and as part of this, the young people will gradually be given more responsibility with budgeting. Eventually, when deemed an appropriate time, they will be given a sum of money each week equivalent to what they may get on social income minus what they may have to pay towards utility bills when independent. It will be an expectation that, supported by the home, they will need to use this weekly allowance for food, public transport, clothing, recreation etc. The home will work closely with the young people's Social Workers, IRO's and the relevant placement team to ensure that they are discharged from care into independent living only when they are properly prepared and ready to leave. To further ensure that the road to independence runs smoothly, the home has a "My steps To Independence" programme in place. This is designed in tiered stages and tailored to individual needs from the age of 13 onwards with the expectation that children/young people are thus better able to cope with the implementation/expectations of a Pathway plan when the time comes. It is also a useful tool in highlighting areas where the young person needs extra support and guidance.

**Making a positive contribution** This outcome is seen as crucial to achieving Economic Wellbeing, because it encompasses the development of self confidence without which young people will struggle to achieve. The young people will therefore be given support within the home in the understanding of their rights and responsibilities and will be encouraged to take on active

---

---

participation in community life alongside being consulted on such matters in order to give them an ownership of their own achievements. This is designed to enable them to develop independent behavior and to avoid engaging in antisocial behavior.

**3. The location of the home, a description of the accommodation and the age range, number of children and the sex of the children for whom the accommodation is intended.**

(a) The Marshes is a 5 bedroom house and comprises a tiled porch, entrance hall, kitchen, education room, cloakroom, and lounge. The first floor comprises a landing, four bedrooms (one staff bedroom doubling as an office) and a bathroom for the residents. The second floor comprises a loft conversion that houses an en suite bedroom that is used by staff. The outside of the home comprises a paved driveway for ample parking and front and rear gardens. There is a garden shed in the rear garden. The home conforms to all Health and Safety legislations including fire prevention etc. A hard wired smoke alarm system has been installed. There is also a fitted alarm system that is activated at night time to protect and safeguard the young people as well as the home (see section 16.)

(b) The home is registered to provide care and accommodation for up to 3 children of either sex with emotional and/or behaviour difficulties. The age range is from 11 to 18. However, before accepting a referral to the home, (in consultation with the home manager, the placing authority and the social worker,) ERA Care would consider the suitability of age differences as part of our matching process. Although the home would not accept a referral of a person who was 18 years of age, it is possible that a young person admitted below the age of 18, but who then passes the age of 18 may stay at the home for a period whilst social services find an appropriate future accommodation. ERA Care is aware that the home must however predominantly act as a home for person's below the age of 18

See ERA Care's **Admission procedures within this document.**

(c) The home is a regular house which is a part of a small village housing development and does not stand out from the other homes in the area. It is felt that this allows the young people to feel like more of the local community and reduces the risk of becoming institutionalized. As the home does not appear different to the outside world, the young people are often better able to adapt and settle in.

Each young person has their own bedroom which is furnished. The young people are then encouraged to help to decorate and invest in their bedrooms, making them their own space, individual to them.

---

#### **4. A description of the location of the home.**

The home is in a quiet village on the edge of Braintree and is close to a number of local amenities, schools, colleges, leisure centres, shops, etc. There is a community hall at the top of the road with a park and green area in which young people can play.

From Braintree or Cressing train station one can be at London Liverpool street station within the hour.

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

The home will enable young people to attend religious services, or receive religious instruction on the premises, in response to their needs and wishes, given their age and understanding.

Information on the religious and cultural needs of each young person as well as linguistic needs will be gathered as part of the referral process and pre-admission planning, and will be incorporated into their written Care Plan. At the point of referral however, special attention will be paid to the cultural, religious, language and general background of the child and the staff team at the home to which the referral relates. This will be important in the decision on whether the home can meet the child's needs and therefore whether the referral is accepted. As ERA Care has a broad range of cultures and diversity within staff teams, it may well be that a change can be made to the particular staff team in question to be able to meet the needs of the child without detracting from the needs of other young people already accommodated at the home.

Young people will be supported to observe any religious requirements. At all times consideration will be given to religious/cultural issues, including any specific dietary or dress requirements etc.

The Home will also be mindful in delivering and supporting the young people with their cultural and religious needs in a way in which suits their wishes and desires. For example: A Muslim child may not always follow all customs associated with the Muslim faith, just as not all Christian children go to Church every Sunday etc. It is important to find out how the child has been following the faith with their parents/previous caregivers and what they want to do themselves as part of their faith, etc.



---

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

It should be noted that the complaint procedures relate not just to the children, but also to individual staff members, family members, significant others such as neighbours, and independent visitors.

Allegations of abuse are dealt with under child protection procedures and must be passed on to the appropriate agencies for investigation.

Any young person who wishes to make a complaint in relation to their social worker or Placing Authority will be assisted to do so by Era Care staff using that agency's own procedures.

In order to provide a good quality of care for young people, members of staff, family members or other representative organisations on behalf of young people, e.g. Independent Visitors, are encouraged to report any concerns or complaints to the Home Manager, the ERA Care Responsible Individual, Social Services or Ofsted, the addresses/telephone numbers of which are made available.

The Era Care Children's Guide contains details of the Complaints Procedure and relevant addresses and telephone numbers.

All new staff are asked to sign and adhere to ERA Care's "Whistle Blowing Staff Concern Policy".

Fundamental to any procedure, there will be the acceptance that any complaint will be taken seriously and appropriate responses to the complaint made. Young people and staff must feel confident that they will not be sanctioned or punished as a result of making a complaint.

The first stage of Era Care's complaint procedure offers the complainant the opportunity to discuss any concerns on an informal level with a member of staff, the Home Manager, the Social Worker or a representative/advocate who will investigate the complaint. Any person who is the subject of a complaint will have no part or responsibility for dealing with it.

If the complainant is not happy with the outcome of this, then the complaint can be processed through the formal procedure as follows.

1. The complainant will put their complaint in writing to the home manager. If the complainant is a child at the home, it may be necessary for an independent staff member/advocate to assist in writing the complaint from dictation from the child who will then sign the complaint form. The home manager will record the complaint in the central complaints register which he/she will investigate and reply to within 28

---

days. The outcome of the complaint will then be also recorded in the central complaints register. However, in certain circumstances when the complaint centres around the home as a whole, the registered Responsible Individual will investigate the complaint. If this is not appropriate, then an appropriate independent person, will be asked to investigate the complaint. This investigation will involve gathering relevant information, through interviewing the complainant, the person whom the complaint is made against and any witnesses. Everyone interviewed will be given the opportunity to have a representative or friend with them when they are being interviewed. The person investigating the complaint will have the power to consult all written records and documents held within the household. The investigation will be completed within 28 days.

2. When the investigating officer has completed the investigation, they will consider the evidence and reach a decision on the complaint. The Homes Manager/ Responsible Individual will be notified of the outcome and the complainant will be sent results of the investigation. The complainant will be notified that they have 28 days to register a written appeal against the decision.
3. After an appeal has been lodged, a complaints panel will be set up, at which the complainant would have the opportunity to present their complaint. At a hearing the complainant will have the right to have a representative with them. A young person will be encouraged/assisted to have someone representing them at a hearing.
4. Following the presentation of a complaint, and associated evidence, the complaints panel has to, within the next 48 hours, arrive at a decision or recommendation. These recommendations are then forwarded to the complainant and any other individuals involved, giving a full explanation of the reasons behind the decision.
5. The complainant has a right to withdraw their complaint at any time during the process.

It is important that if this procedure is used to process a young person's complaint, they understand the process and are kept informed of how the investigation is proceeding throughout.

In the event of a complaint against a House Manager, this will be dealt with by a Director of Era Care. In the event of a complaint against a Director, this will be dealt with by another Director/External appropriate independent person.

The House Manager will regularly review the operation of the Complaints Procedure as part of the monitoring process.

***The above procedure should be used for all complaints, including any by parent and neighbours. The manager of the home will keep a written***

---

---

***record of complaints and the outcomes/ responses to these.***

The Young People are informed about the Complaints Procedure on admission and in the “Young Person's Guide”. Parents/significant others are informed about the Procedure and all staff are required to have knowledge of the ERA Care complaints procedures.

The ERA Care’s complaints policy (standard across all ERA Care’s homes) is available on the ERA Care website [www.eracare.co.uk](http://www.eracare.co.uk)

**Ofsted address and phone number.**

**Ofsted  
Piccadilly Gate  
Store Street  
Manchester  
M1 2WD  
Tel 0300 123 1231**

**7. Details of how a person, body or organisation involved in the care or protection of a child can access the home’s child protection policies or the behavior management plan.**

ERA Care’s child protection policies (standard across all ERA Care’s homes) are available on the ERA Care’s website [www.eracare.co.uk](http://www.eracare.co.uk).

Such policies have been sent to the Essex Children’s Safeguarding Board to be verified that they are fit for purpose.

The behaviour management policy for ERA Care (also standard across all ERA Care homes) is also available on the ERA Care website [www.eracare.uk](http://www.eracare.uk)

## **Views, wishes and Feelings**

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

Every child within ERA Care has a key worker who is appointed to the individual child, normally in consultation with the child. The principle function of the key worker is to establish a positive relationship with the young person which overtime hopefully develops into a healthy child/adult relationship. Key worker sessions are held regularly and minuted. These can be formal or informal sessions depending on the child and it is often more productive for

---

such conversations to be held when there is a relaxed environment. It is important that the key worker will also act as an advocate for the young person and his/her views. In this respect, it is important for the key worker to return to the minutes of meetings and add an outcome to any views or requests made by the young person so that it is properly evidenced that the child's views were listened to, even though at times, for whatever documented reasons, their wishes were not upheld. In the role as an advocate, it is also important that the views of a young person are delivered to review meetings etc when the young person declines to attend.

Whilst ERA Care is committed to having key workers for children, it is crucially important that children are aware that they can approach any member of staff at any time and indeed there are times when a child might deliberately seek out someone in particular who they feel comfortable in speaking about a particular delicate personal matter.

For children to be able to discuss their quality of care, it is important that, where appropriate, they have as much access as possible to information about themselves and especially their care plans on which they are invited to write their comments, with a signature, for discussion by the home or between the home and the social worker or others responsible for the plan.

The Homes Manager will also seek to meet with the young people frequently to get to know them and be there to listen to and respond to any wishes, views and feelings they might have.

A Post Box is located outside of the office which young people can use to communicate any thoughts or questions they want the Manager to know about – this way they can still feel they are being heard, even when the Manager is not in the home. Staff will support them to do this if they find written formats difficult.

## **9. A description of the home's policy and approach in relation to:**

### **(a) Anti-discrimination practice and rights in respect of children and their families.**

Era Care is fully committed to anti-discriminatory practice.

All company staff are contractually required to:

- Support the principles and practices of equal opportunity.
- All staff are provided with training in Equality and Diversity. This covers a number of matters including Equal opportunities, Rights, Discrimination, Non-judgemental practice, Anti-discriminatory practice etc.
- Recognise that it is their duty to promote the above within the home, company and broader community.

- 
- Practice the principles of equal opportunity and promote racial harmony within the home as well as advocating for the children to ensure that all children's rights are being met by other organisations dealing with aspects of the children's care such as schools, colleges, social services, health services, etc.
  - Report any forms of racism by staff and young people to the home manager and director's of ERA Care.
  - Managers are required to monitor and record all racist incidents.
  - In no circumstances must staff be judgmental, demeaning and/ or seek to blame a young person's family, in respect to why a young person is with us or seek to use the family situation as a reason why the child acts in the way he/she does. The child's family members and significant others are treated professionally, with respect and courtesy.
  - Staff remind and support young people in celebrating parents, carers etc birthdays, mother/father days, weddings etc by sending by sending cards, gifts etc to family, cares etc.

### **(b) Children's Rights**

EraCare is fully recognises and supports the Young People and their Rights.

All young people are:

- Given the necessary information and support to access the Advocacy Services for their Placing Authority.
- Given support in following the complaints procedures both in house and externally i.e. With their Placing Authority, Educational Provision, Workplace etc.
- Encouraged and supported to attend meetings such as LAC Reviews, PEP Meetings etc.
- Have a member of staff who will advocate for them and express their views at meetings if the young person feels unable to (Key Worker).
- Be given equal opportunities to access education, health, the Community etc.
- Be supported to follow and continue with any cultural or religious needs.
- Have their views, wishes and feelings heard and recognised.

EraCare recognises that young people have a right to not be deprived of their liberty –

*“Article 5 of the Human Rights Act states that 'everyone has the right to liberty and security of person. No one shall be deprived of his or her liberty [unless] in accordance with a procedure prescribed in law'. The Deprivation of Liberty*

---

*Safeguards is the procedure prescribed in law when it is necessary to deprive of their liberty a resident or patient who lacks capacity to consent to their care and treatment in order to keep them safe from harm."*

*The Mental Capacity Act allows restrictions and restraint to be used in a person's support, but only if they are in the best interests of a person who lacks capacity to make the decision themselves. Restrictions and restraint must be proportionate to the harm the care giver is seeking to prevent, and can include:*

- ***using locks or key pads which stop a person going out or into different areas of a building***
- ***the use of some medication, for example, to calm a person***
- ***close supervision in the home, or the use of isolation***
- ***requiring a person to be supervised when out***
- ***restricting contact with friends, family and acquaintances, including if they could cause the person harm***
- ***physically stopping a person from doing something which could cause them harm***
- ***removing items from a person which could cause them harm***
- ***holding a person so that they can be given care, support or treatment***
- ***the person having to stay somewhere against their wishes or the wishes of a family member***
- ***repeatedly saying to a person they will be restrained if they persist in a certain behaviour.***

*Such restrictions or restraint can take away a person's freedom and so deprive them of their liberty. They should be borne in mind when considering whether the support offered to a person is the least restrictive way of providing that support." **SCIE.org***

As a company we recognise that at times, to best manage to Safeguard a young person – we may have to deprive them of their liberty. This will be based upon risk assessments and be proportionate to the risk that the young person places themselves in and we will always seek authorisation from the Social Worker or Placing Authority first.

However whilst we note that restrictions may have to be applied, we will also seek to plan how and when these restrictions will then be lifted and how we plan to work with the young people in reducing the risk to them which warrants these restrictions being put in place.

---

## Education

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

The Home recognises that some children placed at the home will require an Education Health and Care Plan due to their level of needs.

An education, health and care (EHC) plan is for children and young people aged up to 25 who need more support than is available through special educational needs support.

EHC plans identify educational, health and social needs and set out the additional support to meet those needs.

The Home will communicate with any educational provision whether they believe the young person needs:

- a special learning programme
- extra help from a teacher or assistant
- to work in a smaller group
- observation in class or at break
- help taking part in class activities
- extra encouragement in their learning, e.g. to ask questions or to try something they find difficult
- help communicating with other children

and along with the Social Worker, will work alongside the school and SENCO around ensuring these educational needs are met.

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

The Home is not registered as a school.

### **12. The arrangements for children to attend local schools and the provision made by the home to promote Children's educational achievements.**

Era Care's provision of education is based on the recognition of three factors:

---

- 
1. Some children placed at the home will be in full time main stream education. However, the home caters for children with social, emotional and behavioral disorders, some of whom may have a statement of special educational needs (or EHCP) or excluded from main stream education. There will therefore also be a need for the home to provide other forms of educational provisions, including the development of individually-tailored learning programmes.
  2. The temporary nature of the young person's placement.
  3. The requirement of the government under circular 11/99, for a 25-hour weekly learning programme to be provided for all children from 1st September 2002.

### General procedures

1. For children currently attending mainstream education, the home will continue to promote and support such an education programme. This will include facilitating the school attendance of such children together with the necessary school equipment. The home will also provide a private area for study (homework) which contains suitable equipment, including books. A computer will be made available. The study area will also be suitable for any in house education for excluded children/children with special educational needs.
2. Although the home does not provide education as such, the home will assist the placing education authority (Virtual School) in finding a school to match the needs of the individual young people including children with special educational needs or children who have been excluded from main stream education. The home can also advise the placing authority on in home tutoring organisations. As part of a broader education, the home will assist young people in their education by ensuring library membership for the young people and educational trips to museums etc including being pro active in transforming hobbies and activities into documented educational events. This is vitally important for children who, due to being excluded, may, for a short time, not be receiving 25 hours of education per week. During such spells, the home will be pro active in speaking to the education authorities to ensure that they are working to an appropriate time span to provide an alternative education programme for such excluded or statemented children. All such work will be documented as evidence.

For older children, the home will be active in engaging children in suitable college courses, work experience placements and paid work as well as apprenticeships if possible. The home will contact other agencies such to help in this respect. As part of their pathway planning the homes will also ensure that young people leave our care with the



---

suitable life skills to enable them to live independently, though probably with some ongoing assistance from transitional teams or indeed adult services. Any hobbies and general interests including sporting activities will be encouraged by the home who will allocate appropriate financial resources to support such activities or interests. All activities will be risk assessed and parental consent will be gained if appropriate.

3. A representative from the home (normally the home manager) will attend all educational meetings and will advocate for the child at such meetings if required and receive reports which are filed in the young person's case files. An educational file will be kept in the home that has up to date information on the educational progress of each child, their attendance record, termly reports etc.

## Enjoyment and Achievement

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

See the Quality and Purpose of Care section above (Every Child Matters Outcomes, bullet points 2 and 3) which sets out how the home actively seeks to ensure that all children at the home benefit from a variety of activities, physical and social interests and skills etc (bullet point 2). Bullet point 3 (Achieving Economic well-being) is linked and is essential to ensure that when children leave our care, they have the chance to ensure that through formal education, further educational and training opportunities, possible apprenticeships/work experience and life skills work etc they will be able to maintain and further their interests and aspirations.

*How does the home meet these needs?*

On admission to the home, through the referral process, placement meeting, and initial conversations with the children and through ongoing key worker sessions etc the home ascertains the individual children's likes in activities, sports, hobbies and what they would like to achieve in the future. An individually tailored programme of events and activities is then set up with the children and the necessary finances are made available. Where possible, the home should be active in adding an educational component to activities. For instance if a child likes fishing this could be expanded to keeping a diary of the weights of each fish, the species caught, the locations etc. The home will be mindful that it should actively encourage some activities that involve exercise which is important for the health of the child. It is also important that the home acknowledges the importance of social interaction and should also encourage activities, such as youth clubs, extracurricular school activities etc

---

so that the child is not isolated. This could also include the home actively linking appropriately into the local community. For the future life chances of the children in the home it is also important that children and young people are equipped with the necessary social skills which are vital to complementing their educational and training achievements. To put this in context, some children may even find it difficult and uncomfortable to sit in a crowded restaurant. Although the children's preferred activities and hobbies are catered for, the home should also be encouraging children to try new things where appropriate. The home is equipped with a diverse and wide ranging array of books and magazines and an appropriate daily newspaper is made available to encourage the child to understand and discuss worldly events.

## Health

### **14. Details of any healthcare or therapy provided.**

In general terms the home does not routinely provide intimate hands on healthcare. The home ensures that all children are registered with a local GP, dentist and optician and that regular appointments are made with the dates of appointments and outcomes/follow up appointments being evidenced. All staff are trained in medication administration and recording and are aware of the ERA Care policy and procedures on such matters. All staff are trained in First Aid techniques, food hygiene and other relevant courses and there may be other extra staff training requirements for individual children who, for example, have epileptic attacks/diabetes etc. All the above is routinely monitored by the home manager who will ensure that through individual supervisions and team meetings, the correct procedures are being adhered to.

Some children may be required to attend sessions through an individual Psychotherapist or CAMHS (EWMHS) which will be facilitated by the home. The home will take an active role in supporting young people to be referred to these services or look for alternatives depending on what is needed. It is important that the home liaises with such bodies in the respect of giving them relevant information and feedback to help them in their role.

#### **(a) Details of the qualifications and professional supervision of the staff involved in providing healthcare or therapy;**

ERA Care employs an independent Psychotherapist who, on request, visits the home at appropriate intervals (Monthly Group Supervision). Her main role is to meet with the staff team to discuss how the team are meeting and managing the needs of the young people in their care. These meetings are minuted and agreed strategies are returned to at the next meeting to evaluate their effectiveness. She will also visit the home on other occasions between meetings for a general chat with staff and the children and to look at various documents such as care

---

plans etc. She does not do any actual work with the individual children unless agreed by social services. A record of her professional registration, qualifications, supervision arrangements etc are kept on file in the ERA Care main office.

The Responsible Individual will meet with the Psychotherapist regularly in a supervisory role and to review the work that is being done/needed.

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

If a young person receives any external therapy from outside agencies (CAMHS, ARC etc) then the Homes Manager will seek to ensure that regular meetings are held with the Therapist to ascertain how the therapy is going. Whilst Doctor/Patient confidentiality will remain adhered to, and details of what has been said will not be discussed, it will allow discussion of whether the therapy is having an impact or whether it is helpful to the young person. Therapists will also be invited to attend meetings such as the LAC Review for the child.

This will all be done with the consent of the young person.

The healthcare and therapy that a young person receives can also be measured within the behaviors they display within the home i.e. are they showing improvements, have behaviours changed etc. These changes are documented monthly, on progress reports compiled by the home. They show the outcomes that young people are achieving and allowing staff to take a regular review of how the young person is developing and highlighting areas which may need more support.

Likewise, if a young person is not undergoing any external therapeutic input these progress reports may later highlight an area in which they may benefit from external therapy. So appropriate action can be taken then.

Progress Reports are kept in each Young Person's individual file.

## Positive Relationships

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

The Children Act 1989 defines the responsibilities for young people who

---

---

are looked after. Specifically;

- (a) For young people who are accommodated under Section 20 of the Act, the local authority has a 'duty to promote' contact between the young person and his/her family. These arrangements are facilitated by the home following an agreement between the social worker, the young person and the family member.
- (b) For young people who are subject to court proceedings or to Care Orders under Section 31 of the Act, the local authority has a 'duty to provide reasonable' contact between the young person and his/her family unless the care plan dictates otherwise. This contact can be direct face to face meeting, either supervised or unsupervised, again as directed by the care plan, or by telephone, letter etc. The level and nature of the contact should always be set as part of a clear care plan within the home and be consistent with the overall placement plan for the young person.

Implementation:

In line with the above, the responsibility for the overall assessment of contact arrangements for any young person that is accommodated at the home remains with the young person's social worker/placing authority. Such agreed arrangements which are known to the home and all staff are detailed in and through the following:

- Care plans.
- Child's placement plan.
- Review meetings and minutes.
- Strategy meetings and minutes.
- Planning meetings and minutes. External specialist advice, reports and recommendations.
- A court order.

The home will facilitate such agreed contacts ensuring that:

- Staff do not use any sanction and/or threaten to use such a sanction in respect to contact arrangements.
- The manager ensures that the home meets it's obligations in respect to facilitating any contact arrangements.
- The manager will ensure and provide regular updates on contact visits to the young person's social worker
- The home will provide accommodation that is private, (unless this has

---

to be supervised), warm and has a positive ambience for the purposes of contact visits.

- The young person's contact persons are treated professionally, with respect and courtesy.
- The home provides reasonable refreshments and food for 'contact person' when visiting any young person
- All staff are positive partners in facilitating contact arrangements, which are detailed in the young person's care plan and placement plan
- Staff must be professional and respectful when dealing with families, etc. even if the situation is challenging
- Staff recognise that working with the families, friends and significant others of young people we accommodate is an important element of our service provision
- That all contact arrangements are duly recorded in the young person's case file
- Staff remind and support young people in celebrating parents, etc birthdays, mother/father days, weddings etc by sending cards, gifts etc to family members.
- Staff actively and regularly keep parents advised (depending on the legal of the child) of a young person's progress, achievements, needs, and including significant events (see child protection, notifiable events, absence without permission etc)

## Protection of children

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

It is not accepted as a norm that electronic or mechanical monitoring devices for the surveillance of children are used within the home. However they can be imposed by a court or be used for the purpose of safeguarding and promoting the welfare of the child concerned.

Where there is deemed to be a risk to any young person, the home manager must complete a detailed risk assessment including all circumstances and actions to be taken to reduce the risk for the said young person and ensure that the risk assessment is fully recorded, made known to all those with an interest in the young person and cross referenced to the young person's

---

---

placement/care plan. Details of any decisions made in regards to the Deprivation of Liberty for Safeguarding (see Views, Wishes and Feelings – Childrens Rights) will be recorded in the young person’s Care and Risk Management Plan, alongside timescales for review and how the risks will be sought to be reduced.

Before installing any movement monitoring device, (a camera type device would normally only be used to monitor movements outside of the home) permission will need to be got from the placing authority of the young person(s) in question and the placing authorities of all other young people at the home will be asked if they have any objections to the device being used. The child /young person will also be informed of the home’s intention to install such a device. Records will be kept of the effectiveness of the device, such information being shared with the relevant social worker. When/if the risk assessment is updated and records the risk to be no longer applicable the device will immediately be removed.

There is a house alarm system which has been installed as a safe guarding measure so that staff can be aware of anyone entering or leaving the building after bedtime. This alarm is only connected to the front and back door and is not there for any individual young person, but the home as a whole. Due to fire risk the front door cannot be locked as it is a fire exit – it cannot be opened from the outside but can internally.

The alarm will sound in the office if the door is opened during the night and this allows staff to react and take action in terms of why the door has been opened.

This form of security is in line with what many family homes have in order to safeguard those that live in the home. Staff only activate the alarm once the young people are settled in their bedrooms and staff are going off duty for the evening.

The alarm system is explained in the Children’s Guide and all Placing Social Workers are made aware of the alarm when they are considering placing the young people at the home.

## **17. Details of the home’s approach to behaviour support:**

1. Many children accommodated by the home will/may have undergone damaging or traumatic experiences prior to being looked after. Some will have been subject to chaotic life styles, inconsistent parenting and poor supervision, and many will have low levels of self-control. They may have displayed, and may continue to display, disturbed, challenging or delinquent behaviour, which is unacceptable to other residents, staff, other agencies and the wider community. In some instances they themselves may be overwhelmed by their own lack of self-control.

- 
2. Some children with special needs can exhibit extreme changes in behaviour for no obvious reason and the management of this behaviour may be more difficult because of the child's limited ability to communicate.
  3. Having to control children should not be seen as a failure but as an integral part of the caring and therapeutic roles of the home's staff. It is part of good parenting.
  4. All instances of restraints used must duly be fully recorded in line with the quality standards (standard 9.59) and copied to the individual child's case file and if deemed appropriate notified as per Regulation 40(4)(e)

#### Guidelines on Care and Control.

The home aims to offer a caring, supportive residential environment for the young people in its care. As part of this environment, a stable and consistent framework of appropriate routines and behavioural boundaries that meets the young person needs is seen as being of paramount importance.

Many young people entering residential care bring with them, as a result of previous learning and damaging experiences, attitudes that test and push these boundaries.

Therefore it is essential that the living environment is such that it balances care with control.

The aim of this environment is to help young people to an understanding of what is socially acceptable behaviour, on which to base their future life in the community.

In adopting policies for care and control, staff need to be aware of various issues before they have to implement any sanction:-

1. It is recognised that in providing a positive, supportive and safe environment, staff may be able to divert a young person's energies away from destructive and inappropriate behaviour.
2. A system in which good behaviour is praised and rewarded, must be seen as part of any set of Control and Discipline procedures. Positive reinforcement of good behaviour is a preferable alternative to the punishment of negative behaviour.
3. A verbal reprimand or the withdrawal of adult approval may prevent some unacceptable behaviour. In circumstances where sanctions have to be used, it is important that they are seen to be just and relevant, and that once misbehaviour has been dealt with, staff should not either

---

nag or constantly remind the young person of their error.

4. It is important that a young person sees sanctions as being appropriate, e.g.:

Time appropriateness:- The young person has to be able to see the relationship between time of the misdemeanors and the time at which the sanction is given.

If the time gap is too great, the link between the two is weakened, and the impact of the sanction is reduced in terms of fairness. Immediate action, so long as it is thought out and consistent, is better than making a young person wait to find out the consequences of their actions.

Relevance of the sanction to the misdemeanour:- The most appropriate sanctions are those that have a direct relevance to the misdemeanors e.g. purchasing and replacing glasses that have been broken. Not only can the young person see the relevance of such tasks, but also there is a chance that the young person may make an investment, through the effort, which will result in a more positive response in the future.

Relevance of the sanction to normal life:- The relevance of any sanction is based on the attitudes and feelings of each individual young person. What may be a terrible sanction for one, may be welcomed by another e.g. avoiding group activities. Therefore staff must be aware of each young person as an individual, when deciding sanctions.

5. Sanctions, which are seen as being unfair, arbitrary or inconsistent, will only antagonise, upset and alienate the young person.
6. A young person's age and level of understanding should be taken into consideration when deciding on any sanction.
7. Staff should be aware that particular sanctions may hold particular fears for young people, and that fear from past experiences of sanctions, may lead a young person to more chaotic behaviour, rather than self control.
8. Residential staff could be seen as being in a strong position of power over the young people in their care. Any sanction that is imposed must never abuse this power. Sanctions are not about retribution and revenge, but are designed to encourage young people to make more appropriate decisions about their behaviour in the future.
9. Physical restraint is not seen as part of a day-to-day system of sanctions, but as a particular form of control, to be used in very limited situations. These are outlined in the separate section on Restraint.
10. "Group sanctions" should not be imposed with one resident being sanctioned for the behaviour of the other.



---

### **(a) The homes approach to restraint in relation to children**

As a general rule, the physical intervention of any young person is not acceptable and its necessity can be viewed as a failure of communication and other methods of intervention. However, restraint is on occasions necessary and appropriate and should be viewed as an extreme caring response.

ERA Care will only allow physical intervention where there is an immediate risk of injury to a person (including the child) or severe damage to the property of any person (including the child). Talking, listening, advising and negotiating should be used first. If practicable, staff should always seek to obtain adequate assistance before attempting any physical intervention. Children should be warned when physical restraint is about to happen with the reasons.

If restraint has to be used in these, and only these, circumstances, staff must adhere to the following points, (for their safety, and the safety of the young person).

- Staff should have good grounds for thinking that immediate action is necessary.
- Before any restraint is undertaken, the young person should be informed of what is about to happen.
- The degree and duration of any restraint applied must be necessary and proportionate to the circumstances. It must be applied in a manner that attempts to reduce rather than provoke further aggressive reaction. Only the minimum force should be used, so as to prevent any injury or serious damage. A restraint/action that deliberately inflicts pain cannot be proportionate and should never be used.
- As soon as it is considered safe, restraint should be gradually relaxed, to allow the young person to regain self-control.
- Restraint should be an act of care and control, not punishment.
- After the use of restraint, staff should discuss with the young person, why the restraint was thought to be necessary.
- The young person should be offered the opportunity of a medical examination.

---

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

Restraint training.

All persons working in the care home are trained in the use of restraint. The restraint training is done by a qualified instructor who assesses the individual competence of each member of staff. Refresher courses are done annually, again by the same qualified instructor. Members of staff who perform a restraint will be scrutinised about their actions leading up to the restraint, the restraint itself and the aftermath of the restraint by the home manager ASAP. The use of restraints will be discussed at appropriate intervals during team meetings/supervisions.

## Leadership and management

### **18.The Name and Work Addresses of: -**

(a) Registered Provider: The Marshes.

Full address: 9a John Ray Gardens, Black Notley, Braintree, Essex ,CM77 8NE

Details of company owning the children's home:

ERA Care Ltd.

Head office address: Unit G22 Allen House, The Maltings, Station Road, Sawbridgeworth Herts. CM21 9JX

Company number: 05921904

(b) Responsible Individual: Stephen Milton

(c) The Registered Manager: Hayley Roberts

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

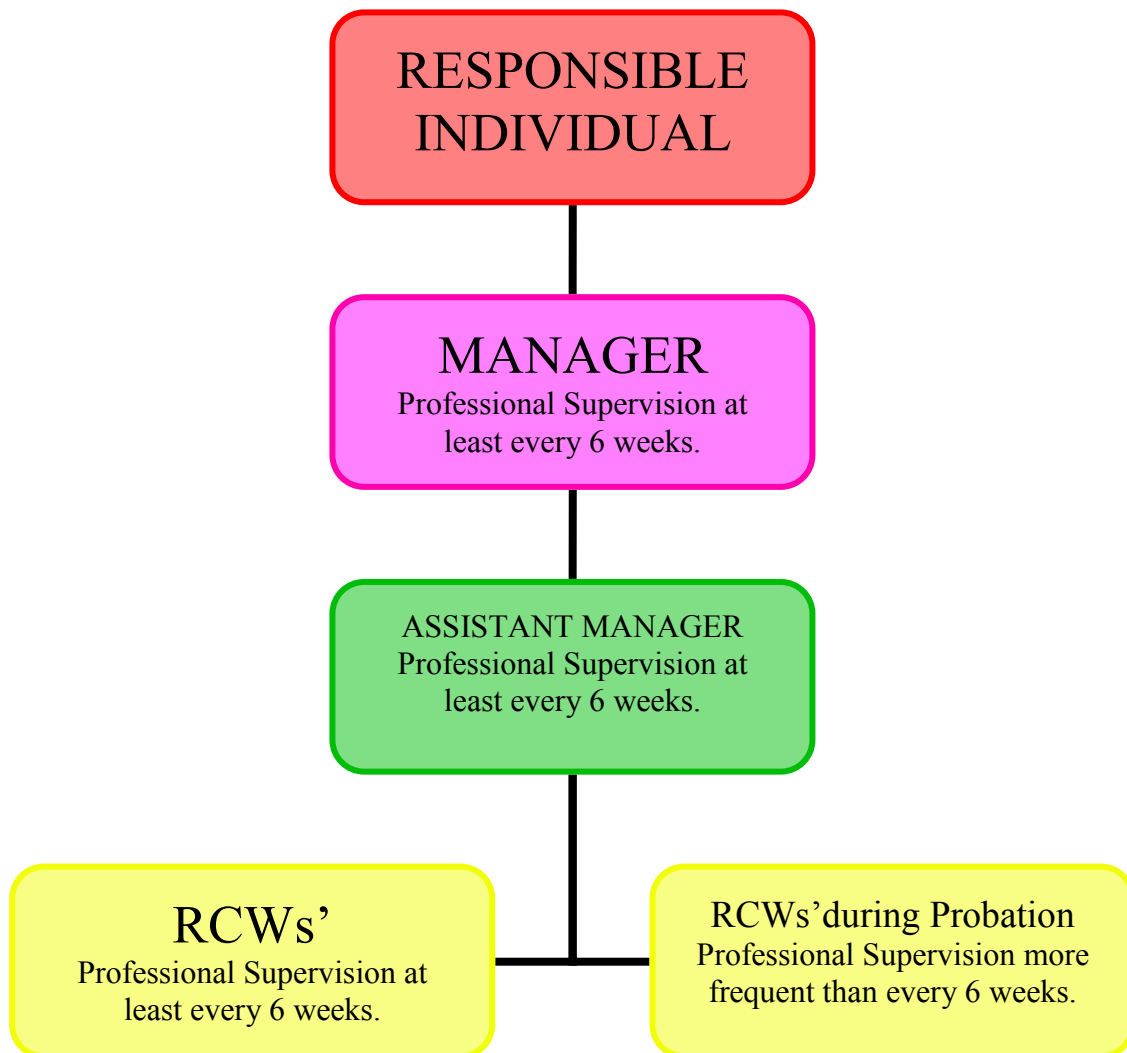
**Management and staff details**

<b>NAME</b>	<b>POSITION</b>	<b>EXPERIENCE</b>	<b>QUALIFICATION</b>
<b>STEPHEN MILTON</b>	<b>Responsible Individual</b>	<i>Stephen has been the Responsible Individual for ERA Care since March 2007. Prior to this, he had over 10 years experience working in the residential care sector. This included seven years as the Regulation 33 officer for Herts Care, Sovereign Care and Continuum Care whilst sitting on both the senior management committees for both Herts Care and Sovereign Care for 5 years.</i>	<i>Open University K100 (Understanding Health and Social Care) and an NVQ 4 in Management (Health and Social Care)</i>
<b>HAYLEY ROBERTS</b>	<b>HOME MANAGER</b>	<i>Over 10 years experience in residential childcare. 4 years as an Assistant Manager and 4 years as an RCW. Hayley has worked with young people ranging from 8 years old to 18 years old and has been a Registered Manager for 3 years.</i>	<i>QCF Level 5 in Leadership and Management (Health and Social Care) NVQ Level 3 in Health and Social Care BSC Psychology Accreditation in Social Pedagogy</i>
<b>JANE COULSON</b>	<b>ASSISTANT MANAGER</b>	<i>Over 3 years experience with Residential Children with Disabilities and 3 years Fostering Experience.</i>	<i>QCF Level 5 in Leadership and Management (Health and Social Care) QCF Level 3 in Health and Social Care</i>
<b>ALAN MINISTER</b>	<b>RCW FULL TIME</b>	<i>Over 10 years working in residential childcare. Alan has worked with young people aged 8-18.</i>	<i>NVQ Level 3 in Health and Social Care</i>
<b>LAUREN DAVIS</b>	<b>RCW FULL TIME</b>	<i>Over 7 years of working with young people in PRU within education. Plus previous teaching experience. First year of working in residential care.</i>	<i>Enrolled on QCF 3 Children and Young People's Workforce Diploma.</i>
<b>FRAN NEWLAND</b>	<b>RCW FULL TIME</b>	<i>Over 14 years in a CWD school, 10 years as an a senior LSA and 4 years as a LSA. Fran has worked with young people aged 11 -19 with many complex needs ranging from EBD, CWD etc. Second year of working in residential care.</i>	<i>Enrolled on QCF 3 Children and Young People's Workforce Diploma.</i>

<b>LISA WALSH</b>	<b>RCW PART TIME</b>	<i>Over 6years working in residential childcare.</i>	NVQ Level 3 in Health and Social Care
<b>GEORGE MASSON</b>	<b>RCW FULL TIME</b>	<i>Worked as a voluntary at MENCAP as a support worker for 3 years and a assistant floor manager for 8 months dealing with young adults with learning difficulties.</i>	Currently completing his probation training and once done he will be enrolled on QCF 3 Children and Young People's Workforce Diploma.
<b>MARK HOSKIN</b>	<b>RCW FULL TIME</b>	3 years experience as a Youth Development Officer and 3 moths previous experience in residential childcare.	Due to be enrolled on QCF3 May 2018.
<b>ELLIE FITZGERALD</b>	<b>RCW FULL TIME</b>	<i>Various international work experience projects, working with disadvantaged school children.</i>	BSc Psychology. Due to be enrolled on QCF3 July 2018.

---

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



All staff are also required and expected to attend Team Meetings on a monthly basis as well as Group Supervision with the Psychotherapist on a monthly basis.

Ad-hoc supervisions are also given due to the pace of work and amount of changes, and the frequency of supervision means that staff often have to “check something out” with a supervisor, obtain a decision or gain permission to do something in between professional supervision sessions. In addition, staff who work closely with their supervisor will be communicating daily about work issues, problems arising, changes in policies or procedures etc.

---

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

The staff team at the home are of mixed sex.

## **Care Planning**

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

Criteria for admission

Young people will normally be admitted to an ERA Care home in a planned and purposeful manner. However there may be circumstances which require an emergency admission. The decision on such requests will take into account both satisfactory and safe arrangements being in place and the recorded likely effects of the admission on the wellbeing of any existing resident.

Referrals procedure.

Initial referrals will be made via telephone/e-mail by local authority placement teams to the ERA Care placement officers who will then consult with the home manager who will be given all information received/requested by the ERA Care placement officers. During this period the relevant social worker will be asked to complete an ERA Care referral form which includes all/additional information about the child including a risk assessment. A placement will not be agreed by ERA Care until this form is completed and received, although this may not be fully possible in an emergency situation. It will be likely that in receipt of this further information other information is also requested by the ERA Care placement officers and the home manager before making a final decision. Such further information may include minutes of recent meetings and a further complex needs assessment etc.

On receipt of this information, the appropriateness of the referral will be ascertained and if agreed, the specific work that will need to be undertaken. The Homes Manager will undertake an impact risk assessment as part of the decision around a referral.

It is an expectation that a placement planning meeting will take place, where possible, prior to planned placements or within 48 hours of the placement beginning, earlier if the child arrived as an emergency placement.

Where possible it is hoped that the placement will be visited by the young person and their social worker prior to their admission.

If the placement is agreed by all concerned, then a written placement agreement from the placing authority is required prior to the admission or as soon as possible in the event of an emergency placement. This should apply

---

to the specific placement and does not allow for the young person to be moved without consultation with the placing authority.

In the event of an emergency placement request, the above procedures will be adhered to as closely as possible, though with an enhanced view on the mixing and matching criteria of the proposed referral especially as the information received by the ERA Care placement team may not be as detailed as in a planned placement. The member of the placement team will complete a "New referral, admission and decision process form" which will be placed in the young person's case file should it be decided to place the child/young person in the home. This form will demonstrate what the placement officer did to exact as much information about the child as possible and all relevant questions which were asked of the local authority placement team/EDT including the response. The home manager/SOC (in the event of the referral happening at night) will take an active part in assessing the information and making a decision about whether to referral should be accepted.

### Post Admissions

On admission, a young person will be made aware of ERA Care's expectations and routines. They will receive an information pack/young person's guide that they may find useful during their placement. This will include information on the local area, including amenities, and information on how to make a complaint, allowances expectations of the home, security of personal possessions, fire safety procedures, including a fire drill ASAP etc. They will also be asked to complete (with the help from staff) some initial documents about their general likes and dislikes, food preferences, hobbies and sports etc. All children will be consulted on the décor of their bedroom which will be altered accordingly, if appropriate.

If not already done, a placement meeting will be held at the home within 48 hours of an admission (earlier in the event of an emergency admission) with the young person, the social worker, the home manager, family members if appropriate and significant others such as a key worker from a previous placement etc. Matters to be agreed include daily routines and expectations, allowances, social worker contact, frequency of visits, contacts with family and important others, health issues, education and future plans. Following the meeting the social worker will provide the home with a copy of the agreed placement plan as soon as possible

An initial internal care plan is then completed by the home. This takes the form of "Primary tasks for the first 8 weeks". After 8 weeks (or before) a further internal care plan is drawn up. This will be reviewed every 3 months or sooner if significant changes are required. Children are encouraged to contribute to such plans and such plans will be made available to them and their opinions sought. These opinions will be reflected in the care plans which children will be asked to sign. Each child will be consulted in respect to an allocated key worker who will advocate for the child in such matters. However,

---

it is important that ERA Care ensures that children are felt comfortable to be able to consult with all staff and management in ad hoc/informal or formal meetings as children may feel that they wish to broach certain delicate subjects with an individual who may not be their key worker. All such conversations will be entered as individual resident meetings/key worker sessions. If a child makes a request, this will form part of the minutes and it is an expectation that these minutes are returned to after a suitable time to add information as to what the home has done in respect to any requests.

This Statement of Purpose was completed by Stephen Milton (ERA Care Responsible Individual and Hayley Roberts (Home Manager).

All staff members to read and sign below to evidence that they understand the contents of the document.