

Statement of Purpose



The Mead, Odiham

- 1) Statement of overall aims and objectives
- 2) Statement of facilities and services
- 3 & 4) Name, address and qualifications of Registered Provider and Registered Manager
- 5) Details of staff
- 6) The arrangements for supervision, training and development of employees
- 7) The organization structure
- 8) The age, sex and number of residents and admission criteria
- 10) Numbers
- 11) Ethos
- 12) Health protection and promotion
- 13) Education
- 14) Recreation
- 15) Arrangement for consultation with residents
- 16) Behaviour management
- 17) Child protection and bullying
- 18) Unauthorised absence
- 19) Surveillance equipment
- 20) Fire precautions and emergency procedures
- 21) Religious instruction and observation
- 22) Contact between children and their parents, relatives and friends
- 23) Complaints
- 24) Reviews of placement plans
- 25) The type of accommodation
- 26) Therapeutic techniques
- 27) Anti-discriminatory practice

1) AIM

We aim to provide a settled period of residential care with therapeutic emphasis and multi-agency involvement, to help children and young people recover from experiences which have rendered them vulnerable to significant emotional and mental health problems and disruption of primary relationships.

Target Group

This service is intended for children aged 12-17 years, who are aged 16 or below at admission and where residential care is the first choice for them. They will have complex needs requiring ongoing assessment, multi-agency services and a period of residential care in excess of six months, in an environment which is conducive to therapeutic interventions.

Objectives

- Provide a settled placement, of 6 months or more Help the child gain greater control over behaviour which negatively impacts upon their lives and relationships.
- Use therapeutic services to help the child make sense of his/her life experiences and regain a sense of worth and value.
- Work with the underlying causes of behaviour thereby reducing the child's propensity to self-harm or to harm others.
- Successfully reunite the child/young person with family or friends or a substitute family placement where adults can meet the child's needs for permanence of relationships.
- Identify those children who require very special resources without which their mental health in adulthood could be compromised.
- Help the child maximize his/her life chances by promoting health and education opportunities and positive social interaction.
- Support care leavers through their transition into a more independent placement.

2) FACILITIES AND SERVICES

- Adopt a care management approach offering ongoing assessment of needs which informs the child's plan and facilitates delivery of an individual package of multi-agency services.
- Work collaboratively with other agencies to ensure that a child's holistic needs are addressed and each agency is contributing expertise and appropriate resources.
- Work to written agreements with parents and carers requiring them to contribute to their child's care plan and support the child in maintaining their place within the family.
- Create an environment in the home which facilitates maximum benefit to the child from therapeutic interventions and treatment involving health professionals.

- Use research to inform practice and ensure that the most appropriate interventions are used to achieve the best possible outcomes for the children and young people.
- Promote staff recruitment and retention policies, which helps appointment of high calibre staff teams.

Quality Standards

- Use `National Care Standards` as the basis for residential child care services.
- Actively seek and use the views of children and their families on an ongoing basis and agree with them the services to be offered that will meet assessed need.
- Commission services applying `Best Value` principles.
- Offer services which are sensitive to multi cultural needs and value ethnic differences.
- Use evidence from research to inform practice and monitor outcomes for children and young people.
- Commitment to staff training to achieve levels of qualification as defined by National Care Standards.

Operational Standards

- All admissions will be planned.
- All referrals will have an allocated case manager. This cannot be a member of staff from the specialist unit.
- Priority will be given to placements where residential care is the first choice of service for the child concerned.
- Create an environment which promotes a sense of hope and self worth, including high quality physical surroundings, positive adult relationships and partisan care.
- Consideration will be given to the existing group and potential for conflict in meeting their needs when deciding the suitability of new admissions.
- Maintaining the child's position within his/her family will be a primary objective for the staff team.

3 & 4) DETAILS OF REGISTERED PROVIDER AND REGISTERED MANAGER

Registered Provider

Cathi Hadley
Hampshire County Council
Children's Services Department
Castle Avenue
WINCHESTER
Hampshire
SO23 8UQ

Registered Manager

Susan Lomax
BA (Hons) Applied Social Studies
DipSW + PQ Social Work
NVQ 4 in Management
Certificate in Health and Social Services Management (Distinction)

The Mead
King Street
Odiham
Basingstoke
Hampshire
RG29 1NF

Tel: 01256 702646

5) MEMBERS OF STAFF

Agreed care staff profile 14 full time equivalents:

1 Deputy Manager;
6 Team Supervisors
7 Residential Care Workers
0.68 Administrative Assistant
1.49 Domestic staff

Current care staff profile 14 staff; FTE 14 (November 2012)

1 Deputy Manager
6 Team Supervisor Workers
7 Residential Care Workers
0.68 Administrative Assistant
Domestic staffing covered by an agency contract

80% of staff hold a qualification at level 3 or higher in Child Care

1 member of staff holds a Social Work Qualification and NVQ5 in Management
4 members of staff hold an NVQ 4 in Care
5 members of staff hold an NVQ 3 in Caring for Children and Young People
2 members of staff hold a level 3 Diploma in Child Care
3 members of staff are studying for level 3 Diploma in Child Care

Staffing Policy

Staffing levels will be adjusted according to risk assessments and waking night staff may be used if necessary. The senior member of staff is responsible for planning the shift, deploying staff and initiating risk assessments relating to staffing levels. All staff have access to management support 24 hours a day. Staff on duty will represent a mix of skills and gender.

The rota will be written to allow for a minimum of 3 staff to be on duty during waking hours whilst the children are in the unit. The minimum number of staff within the unit during the day will depend upon the number of residents in the unit, their needs and planned appointments etc. Waking hours are defined as 07:00-23:00.

2 staff will sleep-in each night, sleep-ins are between 23:00-07:00

6) ARRANGEMENTS FOR STAFF INDUCTION, TRAINING AND SUPERVISION

The Support Force For Children's Residential Care identifies three key stages of staff development:

1. introduction, induction, and getting to know the job;
2. picking up core skills, and coping with the basic residential task;
3. learning specialist skills and identifying with the professional approach to the work.

These three stages are reflected in The Mead's training plan.

Induction

Each induction plan is compiled on an individual basis but all contain the following components:

Planning for Arrival: contact will be made with the new staff member and shift patterns and arrangements for the first day explained. Copies of the Unit's Staff Handbook and Statement of Purpose and Function will be made available prior to the first day of work.

Induction Training: an individual programme will be drawn up reflecting the prior knowledge and experience of the new staff member. It will include experiential learning through observation and shadowing of experienced colleagues, introductory visits to other establishments, discussion with key personnel, community orientation, and supervision. During the first 6 months of employment staff will be required to complete The Children's Workforce Development Councils publication "Your Induction to Work in Children's Social Care. Depending on prior knowledge and experience, new staff will work for a minimum of one to two weeks before they take a full part in the shift system.

Core skills and knowledge

During the first twelve months, induction training will be reinforced with training in the core skills. This will occur through supervision, in-unit training and attendance on training courses, seminars etc. Training needs will be identified, both by the member of staff and their supervisor, and may form part of the probationary expectations.

All staff will be expected to undertake Team Teach Training. This training will provide the underpinning knowledge and practical management techniques for preventing, defusing and managing aggressive behaviour. Refresher training will be provided at regular intervals.

All staff will undertake training in The Pillars of Parenting.

Specialist skills and knowledge

Having acquired core skills, staff will need to continue in their learning so that they are able to demonstrate their competence in providing a quality service. Again, training needs will be identified through supervision. Training opportunities are as before but also include Diploma study, OU courses and the Social Work Degree.

Personal development

Although distinctions have been made between the different levels of training, this does not mean that staff will only receive one level of training at a time. The recording of training undertaken, the identification of existing skills and knowledge and an identification of future training needs will form a personal development contract. Each member of staff will keep a Personal Development Portfolio containing records of performance development targets, learning experiences and achievements.

Supervision

The formal staff supervision structure within the unit is established for all team members, with everyone committed to its maintenance and development. The system is based on a hierarchical triangle with staff being supervised by recognised senior staff, who in turn receive their supervision from the Registered Manager. It is intended that this system creates a two way flow of information that is seen as relevant to the supervision forum.

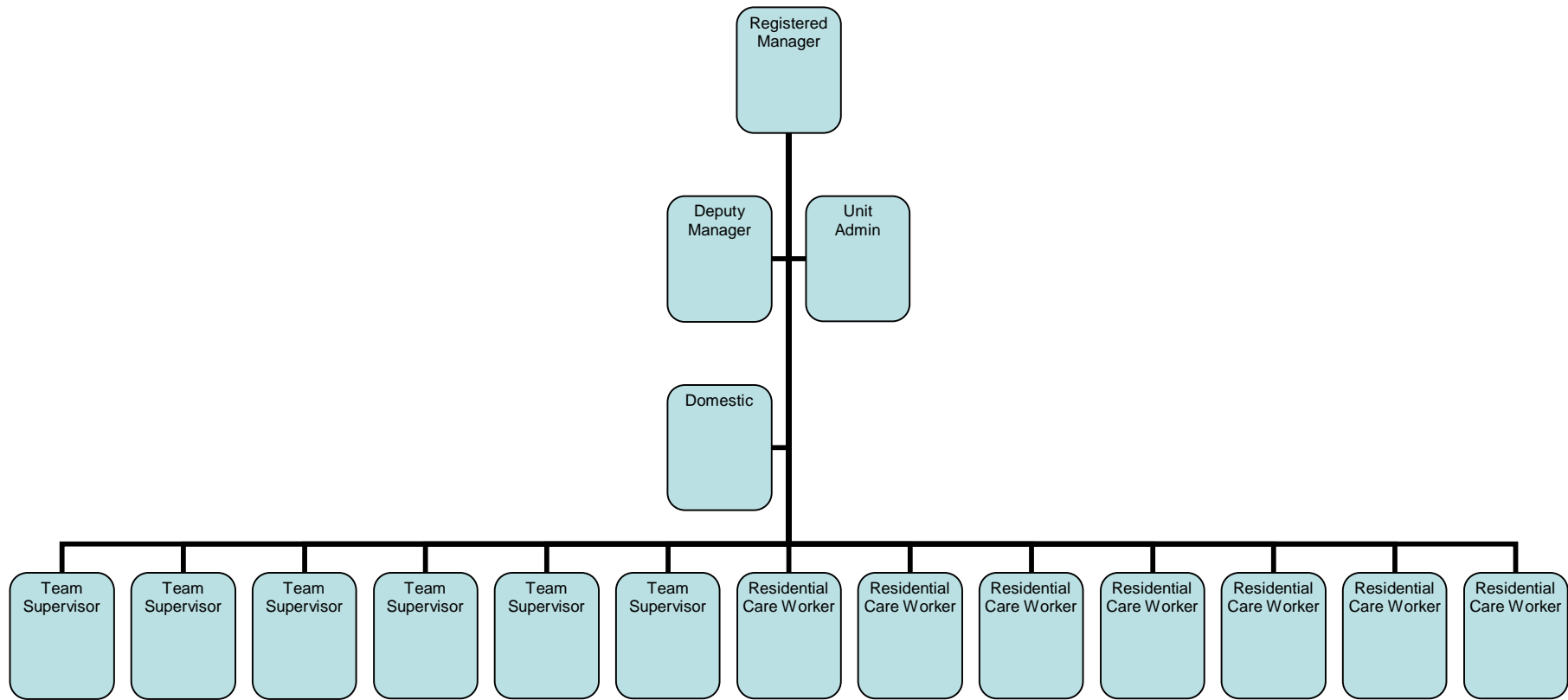
It is intended that four key elements form the basis of supervision content, these being:-

- a. Professional development;
- b. your training pathway;
- c. workload feedback and discussion;
- d. career progression.

It is expected that individuals take responsibility for compiling and retaining minutes, and arranging sessions is the responsibility of the supervisee. Supervision is considered a key element of the residential task, and as such is given high priority. To this end a session should occur regularly be at least an hour every month. Cancellations should only be made when attendance is impossible, and issues that own a higher priority such as court appearances, should be agreed and highlighted in a supervision contract. It is expected that a cancelled session be re-booked as soon as is practicable.

Group supervision occurs within Team Meetings and Pillars of Parenting Consultation.

Informal supervision occurs as and when required.



8 & 9) ADMISSION CRITERIA

The Mead will operate within a clear admissions criteria. Requests for placement will only be accepted through the Placement Commissioning Team. Placement decisions will take into account the needs of the young person and the dynamics of the current group of resident young people. The service is intended for young people aged between 12 and 17 years, who are at or below 16 years at admission. They will require a settled period of care and residential care should be a positive choice. The young person should be willing to accept a placement in residential care and be assessed by their social worker as being able to cope with a group living situation. They will have complex needs requiring ongoing assessment, multi-agency services and need a period of residential care in excess of 6 months in an environment that is conducive to therapeutic interventions.

It is anticipated that all admissions will be planned and in principle The Mead will not accept emergency placements. An 'Emergency Placement' is defined as:

The need to identify an immediately available bed for a child or young person with no pre-admission referral or care planning which links the needs of that child with the service that is provided by that unit.

In exceptional circumstances an 'Immediate Placement' may be agreed by the Service Manager and the Unit Manager. In such circumstances the Service and Unit Manager will agree that the introduction and pre admission procedures can be abridged to facilitate the placement of a child/young person within 24 hours.

Immediate placements will only be considered where a referral form has been completed and it is clear that the young person's needs fit the criteria for admission to The Mead and that s/he will be well placed in that home.

10) NUMBERS

The Mead will accommodate a maximum of 5 residents.

11) ETHOS OF THE MEAD

All staff will be trained in the Pillars of Parenting. The key theoretical underpinning to the residential strategy is the implementation of the Pillars of Parenting (PoP). This programme sets out to empower those working with children with the knowledge and skills to understand the complexity of their task. The 'authentic warmth' model supports clear and strong leadership for those responsible for organising services for children in public care and demands a high level of purposeful kindness and commitment from the carers who look after them every day. It is a child centred approach which is informed by the best knowledge that child psychology has to offer.

The PoP sets key parenting tasks which are designed to enable and empower carers to ensure that their children can achieve the following:

1. Developing a sense of well-being: helping children and young people to feel good about themselves by:
 - Providing quality care and protection
 - Building warm relationships
 - Promoting an appropriate level of self perception/self worth
 - Ensuring a sense of belonging
2. Managing life events: enabling children and young people to respond to difficulties and opportunities by:
 - Enhancing resilience
 - Teaching self management skills
3. Acquiring social confidence and capital: helping children and young people make and keep friends by:
 - Improving emotional competence
 - Developing personal and social responsibility

The authentic warmth approach provides a general framework for good practice but it needs to be adapted for each individual child's needs. This process is achieved through a consultancy model which involves a psychologist working directly with the carers and using psychology to provide a deeper insight into the problems and potential of each child and to inform the selection of the particular support strategies tailored to the child's needs. It is the information from the psychology knowledge base adapted in a creative way by the psychologist that enables carers and managers to generate, agree and implement sophisticated strategies in their day to day interactions with children. In this way the authentic warmth approach becomes a dynamic model of childcare, as opposed to a static and inflexible one.

Strong and committed leadership is a pre-requisite of this programme. Each manager will need to retain the strategic and long term view, take necessary risks, think creatively and inspire staff by helping them to see what they and their organisation could become.

The Mead will:

- Provide a high standard of physical and emotional care
- Provide a 'homely' environment, where young people can feel safe and valued and can take pride in their surroundings
- Respect the different cultural backgrounds of the young people and their families with regard to food, clothing, religion and physical care and to ensure that the young person's ethnic identity is retained and nurtured
- Treat all young people as individuals who are valued because of their individual characteristics

- Respect the rights of young people to privacy
- Encourage young people to express their views and feelings freely and to be fair and reasonable in responding to their wishes and needs
- Ensure that young people and families know what they can expect from the service and are able to take part in the day to day decisions which affect their lives
- Ensure that young people and families are able to complain about the service through established county procedures
- Achieve a balance of care and control and enable children to grow and develop

12) HEALTH PROTECTION AND PROMOTION

The Mead is committed to promoting healthy living through the provision of a balanced diet and engagement in activities. We undertake to make available relevant information and to provide guidance and support across a wide variety of health needs. Information is provided on a routine basis about diet, smoking, drugs, alcohol and SRE. The Mead has access to an attached Looked After Children Nurse, CAMHS therapist and Educational Psychologist and links are maintained with other specialists as appropriate to the children's needs.

Wherever possible young people admitted to The Mead will remain registered with their own G.P. Staff will continually monitor health and the wellbeing of young people in their care and if required, medical assistance will be sought as soon as possible. Diagnosis of any illness or condition must be left to a medical practitioner and when in doubt staff will seek medical assistance rather than not. All medicines prescribed and any proprietary brands are held in a lockable medicine cabinet and recorded and administered in accordance with H.C.C. Policy.

13) EDUCATION

The Mead believes education to be pivotal in the life and development of children and young people and recognise their rights to both a formal and informal education. We will make every effort to ensure all those children/young people we look after receive the education to which they are entitled in order for them to achieve their full potential. We will promote individual talents and ensure that achievements are recognised, both within the unit but also through County events such as the annual prize giving.

We will work in conjunction with families, local schools, the Education and Inclusion Service and all partner agencies to enable the children/young people we look after to reach their full education potential.

An identified member of our staff team will be designated as the lead person for education and they will coordinate between family members, the child/young person, the key worker and other agencies.

When a child/young person comes to The Mead they are expected and encouraged to attend their usual school in order to promote continuity of their education and maintenance of their social networks. They are fully supported in doing so with transport arranged where necessary and appropriate. Staff members work in partnership with schools, local education service staff and Education and Inclusion Team to ensure that each child/young person attends regularly, and any difficulties are dealt with promptly. Staff members will fulfil a parental role through assisting with homework and showing an interest in work and progress including attending parents evenings and other school events. They will contribute to the process of identifying the most appropriate school and, where appropriate, assist with supporting the child/young person to and from school.

All our residents have the facility to undertake private study within The Mead. Access to public libraries and other educational settings will also be made available. Each child/young person has a desk in their room and The Mead maintains a library. The Mead will keep a range of educational materials to enable staff to inform themselves about the curriculum that children/young people are following and about what they may be expected to achieve.

If, by virtue of having been excluded from school, or because of a prolonged absence from an education placement, the child/young person is educationally disadvantaged, The Mead and the linked member of the Education Inclusion Service will arrange appropriate home tuition or a place at the closest pupil education centre. The objective, always, is a planned reintegration into a full time educational placement.

The Mead will record daily attendance and celebrate academic progress and achievement and, in accordance with the Personal Education Plan for each child/young person, provide support and guidance to them.

The Mead will actively promote and encourage access to the widest range of educational and learning experiences by

- providing appropriate access and supervised use of the computer to make use of educational websites and e-learning tools
- encouraging children/young people to use the home and local library
- organising visits to places of interest/significance, recognising the importance for every child/young person to experience new and stimulating challenges
- allowing access to appropriate social and cultural events

14) RECREATION

Celebrations of special occasions e.g. birthdays, bank holidays, religious festivals etc. are planned and prepared for by both staff and young people. We do not have an annual holiday for the whole group but regularly plan for short breaks and weekend trips for two or three at a time.

Visitors are welcomed and young people are encouraged to develop and maintain relationships outside of the home. Visitors may be invited to stay for meals and friends may be able to “sleep-over”.

Recreational activities and outings are arranged for after school occasions or requests

arise and may include trips to the cinema, ice-rink, weight training, swimming etc. All these activities are supervised by staff, individual activities are carried on with the permission and knowledge of the home's staff.

15) CONSULTATION WITH RESIDENTS

Residents have the opportunity to participate in community meetings and are encouraged to raise issues for discussion at staff meetings. These meetings should be chaired by a resident and minutes taken. On a less formal basis, staff are always receptive to suggestions from the residents and will respond as appropriate.

16) BEHAVIOUR MANAGEMENT

It is recognised that the provision of good and consistent care is the most effective way of managing behaviour. As part of this each resident will have a LAC Care Plan identifying the broad aims of placement and an in-house placement plan which will ensure that the needs and behaviours of each resident are managed in a consistent manner. Each resident will be treated as an individual and their rights and responsibilities recognised. Supervision, Pillars of Parenting Consultations and staff meetings will be used to consider the best way of dealing with behaviours and continual assessment will identify developmental needs and result in the regular updating of the in-house care plan.

The Pillars of Parenting Model is based on care staff adopting an Authoritative Style of Parenting. This style of parenting is characterised by high expectations of behaviour combined with high levels of sensitivity to the child. Staff will set clear and realistic behavioural expectations and will use praise and positive attention to promote good behaviour. Children will be offered choices within safe parameters and dialogue between staff and children will focus on enabling children to understand their feelings and behaviours and to make good decisions.

When dealing with undesirable behaviour staff will seek to use Restorative Approaches. The process requires the "offender" to accept responsibility for their action, consider the "distress" they have caused and seek to make reparation. Some undesirable behaviour may be punished through the use of sanctions e.g. verbal reprimand, loss of privileges, payment for damages etc. Normally sanctions will be authorised by the staff on duty, but will occasionally be the result of staff team discussion. All sanctions will be recorded and counter-signed by the Registered Manager. Some negative behaviours are intentionally ignored if it is thought that the pay-off was staff attention. This approach is usually combined with the opportunity for residents to gain a positive reinforcement through the demonstration of an alternative more acceptable behaviour.

No form of corporal punishment is acceptable. The use of restraint is not a sanction and will only be used when other forms of behaviour management are ineffective and then only in situations when a person or property is at risk. Any incident of restraint or violence must be recorded using the appropriate systems.

Staff seek to listen to residents and be reliable and dependable in order that residents can develop a sense of dependence on them and an attachment to them. The formation

of this attachment can provide a sense of security which will allow the resident to explore their past and to develop new socially acceptable skills and responses.

Team Teach

All staff will be expected to undertake Team Teach Training. This training will provide the underpinning knowledge and practical management techniques for preventing, defusing and managing aggressive behaviour. Refresher training will be provided at regular intervals by the unit instructors.

17) CHILD PROTECTION AND BULLYING

The Policy and Practice Requirements of Hampshire's Safeguarding Board state that Children's Services have a statutory duty to "investigate any situation where they have reasonable cause to suspect that a Child is, or is likely to suffer significant harm". If staff receive evidence that a child is suffering or has suffered abuse they will inform the senior member of staff on duty, the Registered Manager, the social worker and their manager. Senior and managerial staff will then decide on the course of action to be taken, this could include referral to the Child Protection Team.

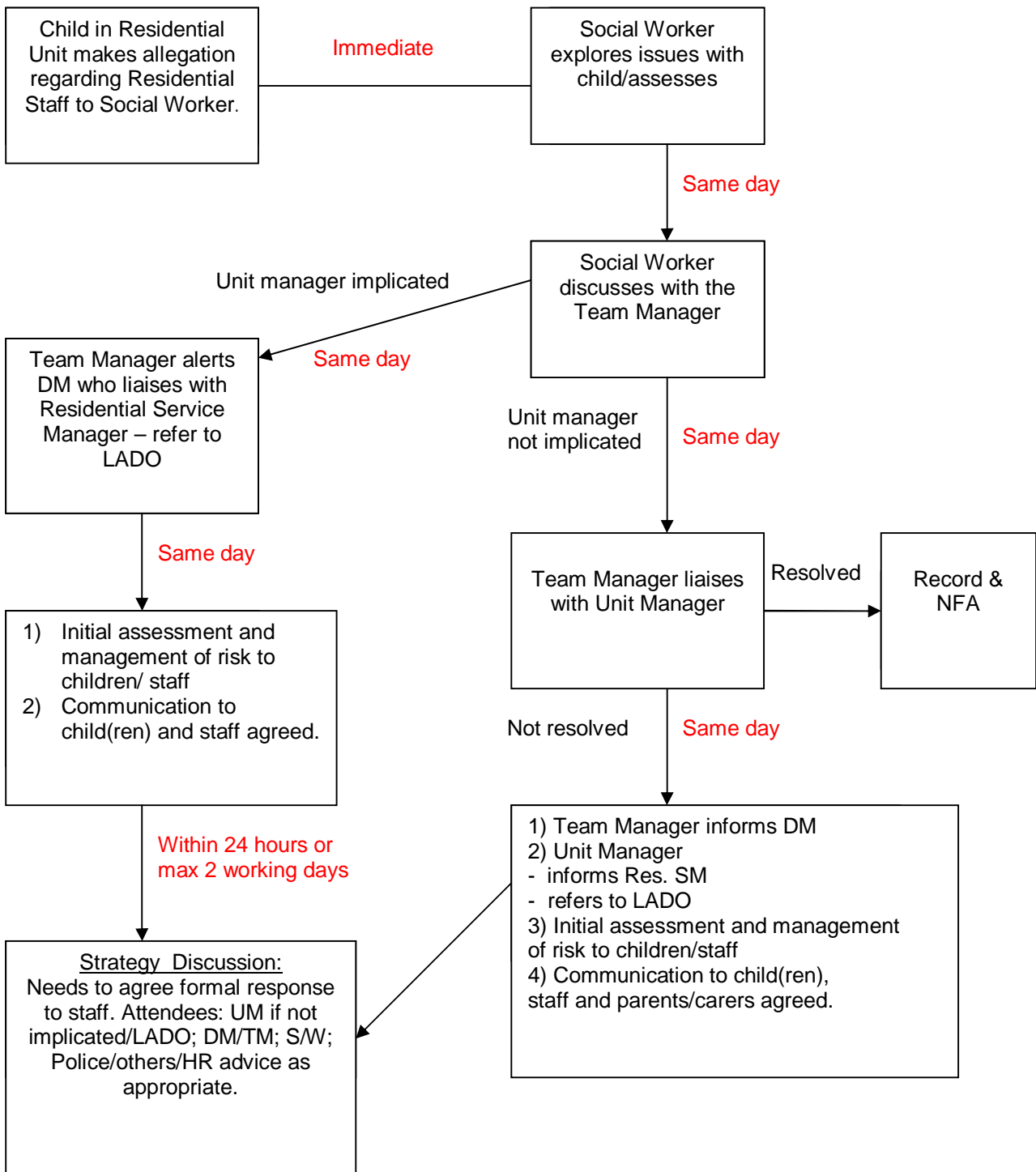
There may be unusual circumstances when it is best to inform the police directly. For example when staff suspect that the abuse has occurred recently and that the forensic evidence is available or staff feel that the child is in immediate danger and the protective powers of the police are required. In such cases the above must also be informed. If the incident occurs outside of office hours the emergency duty team should also be informed.

The Mead will not tolerate bullying and staff will be vigilant in identifying and addressing potential bullying situations. Incidents of bullying will be discussed both on an individual and group basis and support offered to the victim and perpetrator.

Any incidents of misconduct or breach of policy should be reported to the Line Manager or a senior colleague. Anyone seeing or hearing something that they feel is bad practice has an obligation to report the incident as soon as possible to a senior staff member. Silence is not an option, and may be viewed as tacit support for inappropriate activities.

Please see next page for process when an allegation is made against a member of staff.

Allegations against residential staff – process



18) UNAUTHORISED ABSENCE

When a young person fails to return at an expected time, or absconds from the unit and fails to return after a reasonable period they will be treated as a missing person.

Before initiating reporting a child as missing staff will:

- Tell the senior member of staff on duty as soon as the absence was discovered
- Question other staff/children for reasons for absence, possible location and what clothes the missing person wearing
- Search the building and grounds
- Contact any friends/relatives the missing person may have gone to
- Where appropriate and possible, try to locate the missing person and persuade them to return

Once staff are certain that a child is missing they will:

- Inform the police and identify any ways in which the youngster may be vulnerable
- Complete police MISPER forms
- Inform parents
- Inform social worker or Out of Hours Service (OOHS).

When child returns:

- Welcome them back into the unit
- Check that they are ok
- Inform parents, police, social worker or OOHS of return
- Establish when the social work team will be visiting the child
- Enquire of child's reason for absence and record on CR6
- Decide what action needs to be taken as a result including consideration of the need to request a Missing from Care Meeting or High Risk Strategy Meeting
- Update risk assessments/care plan etc. as necessary
- Share information appropriately

19) USE OF SURVEILLANCE EQUIPMENT

The Mead has a security system which allows for the monitoring of external doors and bedrooms doors. Young people's bedroom doors will only be monitored in accordance with individual risk assessments. Staff may carry pagers and an attack alarm so that they can summons assistance.

The Mead will support the use of Electronic Tagging Systems should they be a Court requirement as a result of offending behaviours.

20) FIRE PRECAUTIONS AND EMERGENCY PROCEDURE

The unit is equipped with automatic smoke and heat sensors, emergency lighting and fire extinguishers. They are subject to routine testing and servicing. One member of staff has special responsibility for fire safety, however all staff have daily responsibility for fire safety.

Staff will take precautions to minimise the risk of fire:

- a. switch off gas and electrical appliances when not in use;
- b. no smoking in the building or in the grounds;
- c. isolate and report any faulty or damaged electrical equipment;
- d. familiarise themselves with the location of all extinguishers, emergency exits and how the alarm system is activated and operated;
- e. report any damaged, missing or faulty fire equipment;
- f. take part in regular fire drills and learn how to operate extinguishers;
- g. find out where the fire assembly point is;
- h. ensure all emergency exits are kept free from clutter.

In the event of a fire:

- The person discovering the fire will raise the alarm and call the fire service
- The building will be evacuated by the nearest exits
- Staff will assist people in leaving the building but must not put themselves at risk
- The designated assembly point is on the lawn

Emergency procedure

The Mead operates a Service Recovery Plan. Staff will be provided with a list of contacts who will be available to advise in the event of an emergency. First aid boxes are provided and unit staff are required to attend first aid training.

Health and safety

The Mead has a Health and Safety Policy, the implementation of which is monitored by a designated member of staff. Equally a designated member of staff is responsible for ensuring that The Mead's fire procedures are adhered to and fire instruction is given to all staff and young people at The Mead.

21) RELIGIOUS INSTRUCTION AND OBSERVATION

Resources will be made available to enable religious observance and to promote cultural identity.

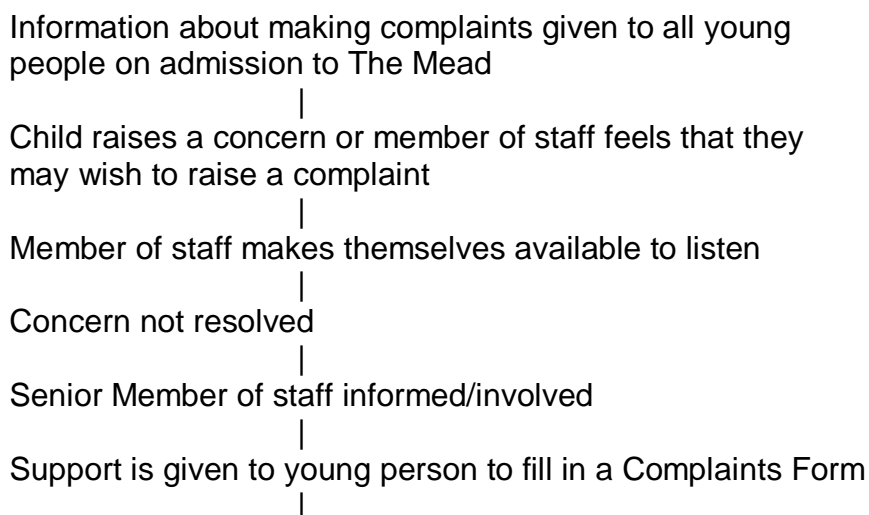
22) PROMOTION OF LINKS WITH FAMILY AND FRIENDS

We are committed to enabling young people to maintain links and their place within their own family and community. However tenuous those links may seem we recognise the importance and value of such links. We support parental responsibilities by sharing information and planning processes, thus ensuring effective communication. Practical assistance will be given in the form of lifts, fares and telephone money. The Mead has sufficient accommodation to provide a room for private meetings and it may be possible for friends to make occasional overnight stays.

23) COMPLAINTS

The Mead is committed to providing individual children all the available information about their legal rights and every opportunity to exercise these rights. The Mead recognises that there may be occasions when a young person needs the services of an independent person or advocate and will be active in procuring such services. The Mead has an established complaints procedure which ensures all complaints are listened to and dealt with.

This is a summary of how a young person might make a complaint.



Complaints Form taken to the Unit Manager

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If Unit Manager unable to resolve the situation,
County Complaint policy will be followed

Complaints from children, their families or others may also be sent to the Registered Manager or:

- Hampshire County Council Complaints Officer, The Castle, Winchester, Hampshire SO23 8UJ. Tel. 01962 847256
- Ofsted National Business Unit, Royal Exchange Buildings, St Ann's Square, Manchester M2 7LA. Tel 0300 1231231, email enquiries@ofsted.gov.uk

See also section regarding child protection and bullying for flow chart relating to complaints against staff.

24) CARE PLANNING AND REVIEWS

The home complies with current legislation in ensuring that appropriate plans are compiled, implemented, and regularly reviewed within the required time scales. This is always done in consultation with the young person, their families and significant others. The young person is supported in the process by their social worker and key-worker. Placement plans are reviewed monthly, and statutory reviews held at due intervals, chaired by an independent reviewing officer. Young people are supported by their keyworker to participate in statutory reviews and other planning meetings that may be held for them.

Due to the multi-faceted and ever changing nature of young people's needs it is essential that a regular and frequent in house review of plans be made. To facilitate this process a care plan recording system is employed. It is required that key-workers meet with their allocated young people at monthly intervals to discuss, review and if necessary modify the needs previously identified. It is intended that a regular updating as described ensures that:-

- a. Young people's needs are regularly assessed.
- b. Plans focus on relevant aims and objectives.
- c. Child care placements remain focused packages of care.
- d. Young people are not permitted to "drift".

In conjunction with the care plans, a monthly report will be written by the keyworker as an update of information and progress. The monthly report will be signed by the keyworker, the child and the unit manager and then copied to parents and social worker.

25) ACCOMMODATION

The Mead was built in the 1930's and underwent considerable refurbishment in 2012. The house is in a residential area of a small village. There are large gardens and easy access to local amenities. Downstairs areas consist of a large kitchen, two sitting rooms, dining room, education room, laundry room, cloakroom and staff office. Upstairs there are five single bedrooms and two bathrooms for the residents and two en-suite sleeping-in bedrooms for the staff. The Manager and Admin Assistant share an upstairs office. Residents will be provided with a bedroom key, staff will respect the child's right to privacy and will only enter the room uninvited or search possessions as the result of a risk assessment. The kitchen equipment is available for use by residents under the supervision of staff.

All areas of the premises are designated as non-smoking areas in line with HCC policy.

26) THERAPEUTIC TECHNIQUES

All residents at The Mead will have their health needs assessed. Any therapeutic intervention will be provided by an external consultant and staff interventions will be guided by the consultant. The Mead benefits from the services of an attached Educational Psychologist and an attached CAMHS Therapist. The Mead will use the Pillars of Parenting Model within daily interactions.

27) ANTI-DISCRIMINATION AND EQUAL OPPORTUNITIES

The Mead operates within an Equality and Diversity Policy. The policy states that The Mead is committed to advancing equality and diversity as a key feature within all its activities, as this is a shared vision which is ethically right and socially responsible. The Mead aims to provide a working environment and culture which recognises and values differences. The Mead will proactively tackle all discrimination and ensure that no individual or group is discriminated against in any way or form for any reason.