HOLDEN KNIGHT

Statement of Purpose.

Dahlia House: About our home.

URN: 2814872

Transparent | Respectful | Kind | Reliable | Adaptable

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Section One – Quality and Purpose of Care.

1. Scope of support provided

Dahlia House is in the Collyhurst area of Manchester and is privately owned by Holden Knight. The home is a therapeutic crisis intervention home and is registered for one young person who is experiencing social, emotional and behavioural difficulties. The needs of our young people can vary and young people living in the home may have a mild learning disability, a diagnosis of Autism/ADHD and PDA. Most of our young people that come into our care begin with high levels of staffing and support, which can be reduced or increased dependant on the needs of the young person. Our individualised setting means we can accommodate young people who are leaving secure settings, are at risk of being referred to a secure setting, or who for their own safety and support may be under the guidance of a Deprivation of Liberty Order (DOLs). We specialise in supporting young people who have experienced developmental trauma, and may be experiencing emotional dysregulation, and/or attachment issues relating to their experiences of finding the right place for them within their family or the care system. The home offers short-to–medium-term residential placements for children and young people of any gender, aged between 10 and 17 years of age. We aim to support children and young people to reach their full potential and where appropriate, prepare them to return home, live in a new placement or live independently as an adult.

2. Our Values, ethos, and desired outcomes

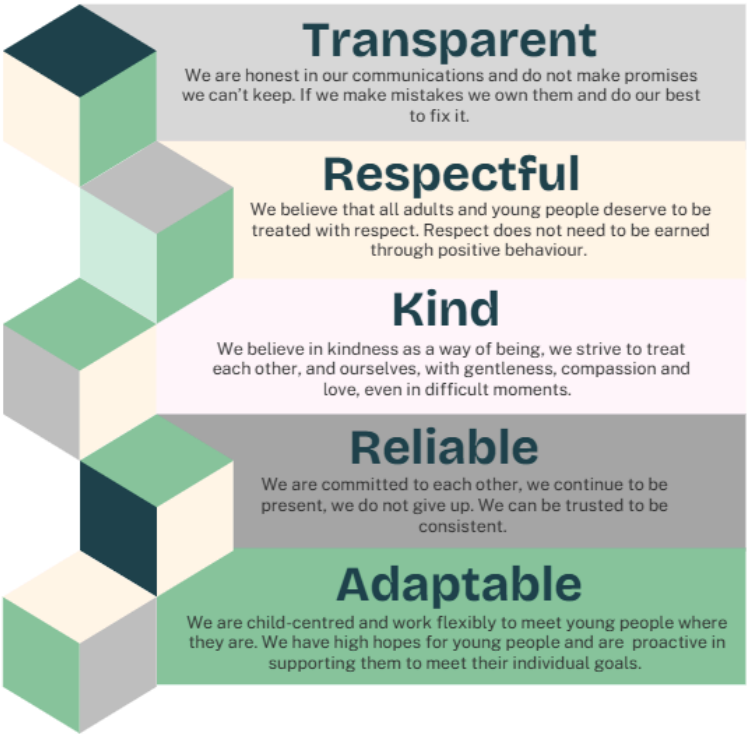


Figure 1. *Holden Knight Values*

At Dahlia House we believe that children and young people are entitled to the highest quality of care, and we therefore aim to provide a physically and emotionally safe environment that is nurturing, homely and non-institutionalised. A place that allows them to experience being a child within consistent, stable structures and boundaries. Our ethos is built upon our shared values of being kind, reliable, respectful, adaptable and transparent. We operate as a team which includes the young person and our therapeutic approach is based in the most up to date trauma-informed evidence base.

Our goal is to cultivate a "Psychologically Informed Environment" where being trauma-informed runs through all that we do, including the physical spaces we provide, the language we use, the policies we implement, and the atmosphere we create. Creating a therapeutic environment around the young person supports them holistically even where a young person may not be ready for formal individual interventions. We aim to build a foundation of empathy and respect for the young people we support. Building meaningful and trusting relationships is essential to providing stability for our young people both now and in the future.

Our in-house therapy service, training academy, and therapeutic model provide our staff teams with the necessary tools and understanding to provide Trauma Informed Care. Our staff undergo comprehensive training to address the challenges associated with complex behaviours and needs exhibited by the young people. They also receive ongoing support to remain committed to young people, even during difficult times. Our hope is that working in this way we can give the young person a

new and different experience of being cared for and provide them with a sense of safety and security they can take with them into the future.

3. Safe Steps Approach and how we support young people

To support us with these goal's Dahlia House offer's a trauma informed model of residential care underpinned by Our Safe Steps Approach. Drawing on the most up to date evidence base for working with young people who have experienced adversity, our therapeutic approach is sequential, developmentally informed and relationship led. Centred around the key tasks of therapeutic parenting and trauma recovery, our model prioritises establishing physical and emotional safety at all levels, while sequentially working on building trusting relationships, showing care in ways young people can tolerate and accept, and, when the young person is ready, building the skills and knowledge they need to process their trauma and move forward.

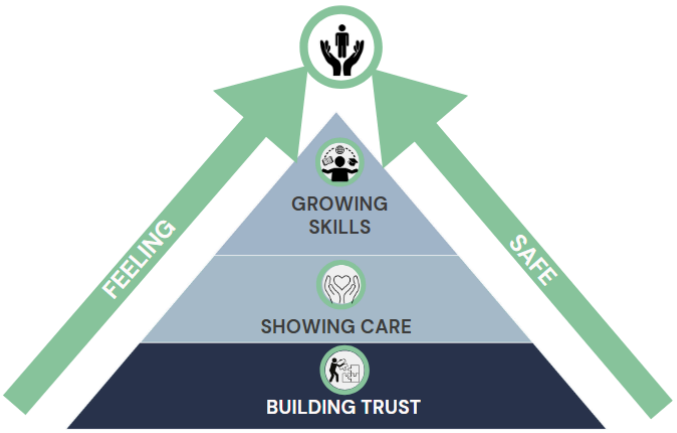


***Figure 2**. Holden Knight's Safe Steps Approach*

When welcoming a young person to the home, we prioritise establishing safety using consistency, predictability and routine. Young people are supported to understand the shared expectations of the home and the agreed ways the team will support them. We take a holistic approach to safety including sensory and grounding approaches, to ensure young people feel safe, in the home, with the people around them, and in the relationship's, they are building with the team.

As a young person begins to experience safety in the home, we then help young people begin to trust that that safety will continue, that they can rely on the care we provide and that they can be themselves with us. In this phase and throughout their time with us the team will draw on elements of PACE (Playfulness, Acceptance, Curiosity and Empathy), a therapeutic way of building trusting safe relationships.

When young people feel safe and trust those around them, they can then begin to experience feeling cared for, in ways they can tolerate and manage and begin building their skills and knowledge. Using this model, interventions are sequenced

and targeted at building connection and safety to support skills-based interventions when the child is developmentally ready to receive them.

The staff at Dahlia House will support young people with decision making and understanding the link between choices and outcomes. Young people will be sensitively supported in a non-judgemental way to reflect on their behaviours, and they will be supported to develop more adaptive ways of responding, communicating and managing strong feelings. All young people who live in the home will have a Therapeutic Behaviour Support Plan which guides staff on how to support that young person when they are experiencing different levels of distress.

The staff at Dahlia House promote self-esteem through recognition of achievement and praise. Our staff will always show unconditional positive regard and acceptance of the child's experience to support them in building their self-esteem, trust and confidence. The home will work closely with colleagues from Education, Health, Social Care and other agencies where appropriate to ensure implementation, review and development of individual placement, care, health, and education plans which are reviewed monthly or sooner if a significant incident arises. The young people are encouraged and supported in reading and contributing to all their individualised plans.

Staff at Dahlia House support each young person to prepare for their transition from the home, whether they are returning home, moving into a foster placement, or moving into another Residential Children's Home or Supported Accommodation. The staff will support young people by introducing and following individualised transition plans that have been agreed by all relevant parties.

4. Description of the home.

The staff at the home have worked hard to create an inviting homely environment for the young people living there.

Dahlia House is a semi-detached property on a residential street with another property attached to it, there is ample parking at the front of the home for several cars. The home has 3 bedrooms (two of which are staff sleep rooms) and an office room, 3 bathrooms, a cosy living/dining area and kitchen with modern appliances. There are no obvious features that identify it as a children's home.

To the rear of the property is a large back garden with both grass and patio areas. Within the home there is ample space for recreation, education, leisure pursuits and activities. Books and magazines, a computer, television, a range of board games, and materials for artistic and creative pursuits are all provided.

On being welcomed into the home the young person is encouraged to personalise their bedroom with their personal items and additional items can be purchased to support the young person to settle.
The home provides facilities for young people to make private phone calls, see visitors in a safe setting; this can be supervised if required.

Staff have access to the homes car to help facilitate travel for the young person; this will be parked on the drive; all company vehicles have weekly maintenance checks to ensure they are safe to drive. In addition. This enables the location of the vehicle to be monitored and the way in which the vehicle has been driven in respect to safety. Home Managers are informed on a weekly basis if there are any issues which need to be addressed or any speeding violations.

5. Location of the home

Dahlia House is situated in the heart of Manchester, with access to local amenities close by. Dahlia House is also close to Manchester canal, which is around 30 minutes away, with lovely walks and scenery which gives a lesser city feel. The home is situated in Collyhurst. The home is just 1 mile away from the centre of Manchester which gives our young people access to a range of shops, restaurants, sporting facilities and education provisions The home is situated near excellent travel links, including rail and bus services. The home is also in good proximity to several sports/health clubs (Manchester tennis club, Etihad campus, national cycling centre) offering activities such as swimming, tennis and martial arts in addition to public parks and gardens which offer young people opportunities to learn new skills, gain new hobbies and maintain a healthy lifestyle.

It is also near a range of health services including doctors, dentist, opticians and urgent care facilities. The home will have the additional support of a LAC Nurse who will visit the home regularly to support young people with a range of medical advice and guidance on an informal basis.

A location risk assessment is complete and available at Dahlia House. This is reviewed at least annually however updated with local crime statistics frequently.

6. Supporting the cultural, linguistic, and religious needs of children.

Dahlia House welcome young people regardless of their race, gender, sexuality, ethnicity, religion, or ability. All young people are encouraged and supported to follow their cultural and religious beliefs. Young people are transported to their place of worship. If young people require prayer books, prayer mats, religious artefacts or want to attend classes related to their religion, the home will provide a budget and transport to support this.

Dahlia House will identify and promote local community resources that contribute to meeting the needs of individual young people living in the home. When these resources do not meet required needs, alternatives are sought and suitably identified. This is regardless of geographical location. For example: hairdressers who specialise in caring for African Caribbean hair, LGBTQ+ meetings and places of worships and beliefs.

Different cultures, linguistic, and religious needs will be embraced and promoted as an opportunity for learning and development for the staff team through staff meetings, training, and supervision.

7. How to make a complaint.

Our complaints policy is available to parents, carers or the placing authority upon request. The homes' Registered Manager will handle the complaint in the first instance; however, children can approach any member of staff to make a complaint. Dahlia House aims to provide a high-quality service to the children and young people living in the home. Children and young people will be given information on how to make a complaint and to whom. This information will be given to children and young people when they are welcomed to the home, this is also included in the Children's guide.

Dahlia House is committed to ensuring that if any young person in our care feels unhappy, unsafe, unsupported, at risk or unfairly treated or has a general grievance of any sort that they have clear and free access to someone who will listen to them. All complaints are taken seriously and as such are dealt with accordingly and in consultation with the young person. In the first instance young people can have an informal chat with a member of staff of their choosing to try to resolve the issue. The staff will help the young person to record the complaint or will give them complaints form to complete independently. Children will be supported to make a complaint both internally and externally and will be kept informed of the progress of any investigation and the outcome of the complaint will be provided in writing. There are written policy and procedures for the staff to follow in dealing with complaints. All staff will be trained on these policies. Staff will listen carefully to what a child or young person is saying and be alert to their concerns; particularly if they express unhappiness about any aspect of their care or treatment. Child protection issues will be dealt with in line with Dahlia House Safeguarding policy and procedures. There will be no form of reprisal against a child or young person who makes a complaint.

Within the children's guide children also have access to the phone numbers for Ofsted, NSPCC and advocacy services should they wish to speak with someone outside of the home.

All young people also have access to the Placing authority complaints procedure.
A record of all complains, whether informal or formal, is kept by the company and, if the complaint is made by a young person, depending on the content this will be kept in the young person's file or within the managers confidential files.

8. Child protection and behaviour management policies

At Dahlia House protecting young people is our priority. The culture in the home will be to provide a safe and secure space where staff will have an open dialogue with young people around topics such as Child Sexual Exploitation, road safety,

appropriate relationships, internet safety and any other topics that are pertinent to ensuring the safety of the young person.

The staff at Dahlia House will work collaboratively with the Multi-Disciplinary Team around the young person to;

• Risk assess whether each young person is at risk of harm, considering information from their care and placement plans

• Plan to reduce the risk of harm to each young person taking account of that information

• Protect each young person effectively from harm

• Support each young person to understand how they can manage their own safety.

• Staff to understand their individual responsibilities and roles in relation to protecting young people, including what action to take whenever there is a serious concern about a young person's welfare

• Take effective action whenever there is a serious concern about a young person's welfare, responding appropriately and alerting and seeking to involve relevant persons to manage risks and maintain each young person's safety

• Monitor the physical environment to protect each young person from avoidable hazards to health. The safety and well-being of the young people placed at the home is the primary concern and their welfare is paramount.

Young people should be safe from maltreatment, neglect, violence and sexual exploitation. They should be kept safe from accidental injury and death, safe from bullying and discrimination, safe from crime and anti-social behaviour and be cared for in a stable and secure place.

As part of the induction for staff working in the home, they will complete Safeguarding Training and any additional training to ensure they have knowledge and skills to identify any causes for concern and deal with disclosures and allegations of abuse. If a young person discloses to a member of staff, they will be advised that the information will have to be shared with the Manager, social services, and the police if necessary. Young people must be listened to and enabled to report any allegations at the earliest opportunity. Staff will not ask any leading questions, and the young person will be allowed to explain in their own words. A detailed record of the conversation will be completed, and a referral will be made to the Local Safeguarding Children's Board under Local Child Protection Procedures within one working day. Any member of staff who has reason to believe that a young person is at risk is required to report their concerns to management immediately.

All staff know that abuse can occur anywhere and that anyone may be a perpetrator of abuse. If the involvement of the Manager is suspected, staff know they must use

the Confidential Reporting Policy (this may also be referred to as Whistleblowing). If the alleged abuser is a member of staff, they may be suspended without prejudice until a full investigation has been completed. If another young person is the alleged abuser both social workers will be contacted to determine what action should be taken. In the Manager's absence the person responsible for managing the allegations will be the senior member of staff on duty in consultation with the head of Care / Responsible Individual. All staff undergo Child Sexual Exploitation training and regular safeguarding training. Each young person is cared for differently in accordance with their needs in terms of safeguarding and CSE. The staff work closely with local authorities, and public services to formulate personalised plans to protect each young person.

Dahlia House take a view that any child who is unsupervised and doesn't have permission to be in the community to be at risk, and the Missing from Home policy will be adhered to. Many of the young people who come to live at the home will be vulnerable and staff are always mindful of the risk of CSE, CCE and other risks young people may face. Each episode of Missing by a young person will be investigated carefully by the home. In view of this, a specific individual risk assessment is completed for all incidents of unauthorised absence to determine what action needs to be taken. This will depend upon age, functioning ability, usual patterns of behaviour, previous concerns and events leading up to the absence. Generally, all missing episodes will be reported to the police, all required documentation will be completed, and the placing authority and parents will be informed. When a young person has returned home after a missing from care episode, a return interview will be completed by the social worker, or an appointed independent person. The aim of the interview will be to understand the reasons for the missing episode, where the young person was, who they were with and alternative strategies to be identified and implemented. Staff from Dahlia House will not conduct the interview, which allows young people to disclose any concerns/issues that they may have surrounding the reasons for their missing from care episode. If a young person is persistently absent from the home or if they are at risk of harm, the Home Manager may request a review of the care plan or a strategy meeting.

As part of the welcome process, an initial information sheet with all the essential information for a young person is completed including obtaining a recent photograph. This is placed in the young person's file so that if they need to be reported as missing from home, all the relevant information will be readily available. A Missing from Home Protocol will have identified the risk management strategies for known behaviour. Within this plan the time scale within which the young person becomes absent or missing will be identified along with contact numbers for all parties with a legitimate interest in the welfare of the young person. When it is known the young person is absent without permission, an immediate search of the premises and surrounding area will be undertaken. Staff will follow the individual protocols which includes who need to be notified. This will include the Police, placing authority and those with parental responsibility and the Manager or Manager on call.

On the young person's return:

• Staff will ensure the young person is safe and comfortable and they will be offered food and drink

• A debrief with staff will be offered.

• All parties that were identified will be contacted regarding the young person's return.

• The social worker will be contacted, with a view to visiting the young person and for a return interview to be arranged if they were classified as missing. Dahlia House will seek information once the return home interview has taken place, to allow appropriate knowledge for reviewing and amending risk assessments and individual placement plans.

Our procedures are compatible with the local authority; a copy of both the Joint Protocol for Children & Young People Missing from Home, Holden Knight PAN – Lancashire can be provided along with the individual child's Missing from Care Protocol.
Our policies and procedures are easily accessed via https://holdenknight.trixonline.co.uk/contents/contents and kept up to date in conjunction with Tri-x.

Section Two – Views, Wishes and Feelings.

8. Policy and approach to consulting children about the quality of their care

Dahlia House is managed and run, as far as is practically possible, to emulate a family environment. Young people are consulted about all aspects of their daily life. Staff at Dahlia House endeavour to:

• Seek, consider and, where possible, act upon each young person's wishes and feelings in relation to decisions about young people's care and welfare

• Regularly seek young people's feedback about the quality of care.

• Explain to each young person how their wishes and feelings have been considered and give reasons for decisions

• Support each young person to express their wishes and feelings

• Explain to each young person how their confidentiality will be respected and the circumstances when it may have to be set aside

• Assist each young person to prepare for a LAC review and to make their wishes and feelings known for the purposes of a review

• Keep under review and, where appropriate, revise the Children's Guide, ensuring a revised copy is disseminated.

• Support each young person to understand the content of the Children's Guide, reports about the home or anything that affects the quality of the care they receive.

• Enable young people in our care to provide feedback to, and raise issue with, an appropriate person about the support and services the young person receives

• Give young people the information, appropriate explanations and choices about daily life in the home and the wider plan for their care

• Ensure young people have access to advocacy support to ensure their voice is heard.

Consultation with external professionals working with the home can provide opportunities for feedback from the young people such as through the Regulation 44 Visitor. Written consent is sought by the young people and placing authority to ensure they give permission for any external visitors to inspect and access the records as part of the Independent Visit process.

Young people will often express their wishes, feelings and views spontaneously. Staff will therefore respond as necessary at the time. In addition to this, key working sessions and regular progress reviews are used to explore and discuss relevant matters and reach agreement on action to be taken if any. Staff will work closely with young people living in the home on their care plan and are encouraged to discuss what they want for themselves for both the short- and long-term future. They discuss how they think they can reach these goals and what they feel they need to do to achieve them.

9. Policy and approach to anti-discriminatory practice in respect of children and their families and children's rights.

Dahlia House is committed to ensuring that all young people, adults, visitors, and their families are treated equally and have freedom from discrimination. The staff working in the home recognise and respect diversity in society and will provide a consistent quality of service without discrimination on grounds of gender, religion, ethnicity, cultural and linguistic background, sexual identity, mental health, age or any disability.

There is no legal definition of bullying however, it's usually defined as behaviour that is:

• repeated

• intended to hurt someone either physically or emotionally

• often aimed at certain groups, e.g. because of race, religion, gender or sexual orientation. It takes many forms and can include:

• physical assault

• teasing

• making threats

• name calling

• cyberbullying - bullying via mobile phone or online (e.g. email, social networks and instant messenger)

The damage inflicted by bullying can be frequently underestimated. It can cause considerable distress to young people, to the extent that it affects their health and development or, at the extreme, causes them significant harm (including self-harm). We endeavour to promote and safeguard the welfare of each young person and the right of all staff to feel safe in their working environment. It is the responsibility of all staff members to ensure that each individual living or working at Dahlia House is treated with respect and is protected from oppression, humiliation, and all forms of abuse. Staff will aim to identify young people who are at risk of being bullied and will endeavour to ensure that all young people are protected from all forms of physical abuse, maltreatment, or exploitation, including sexual and racial abuse and the young people will be encouraged to recognise their own rights and to understand that rights carry a responsibility to respect the rights of others.

At all times staff will promote anti-oppressive practice both with young people, each other and any other person visiting the home in either a professional or personal capacity.

Section Three – Education.

10. Supporting children with special educational needs.

The home will support any young person who has an Education Health and Care Plan (formerly statement of special educational needs) to be able to fully participate in their education. If it is felt that a young person is having difficulty maintaining their educational placement, then a professionals meeting should be held. Where a young person does not have an Education, Health and Care Plan, Dahlia House staff will discuss with the school whether statutory Assessment for special Educational Needs/Education health and Care Plan may need to be considered to identify the appropriate additional provision required to support the young person in their learning. Where Statutory Assessment is agreed the process may take up to 20 weeks. In these cases, the home will work with the school to ensure the young person is fully supported to attend school and access education whilst the assessment is completed. The home will work collaboratively with virtual school.

11. Education curriculum and the arrangements for education.

Dahlia House is not dually registered as a school.

12. Promoting educational attainment.

All young people up to the age of 16 should have a full-time school place of at least 25 hours each week. If this is not the case when they arrive at Dahlia House the

home will work with the young person's social worker, the Integrated School Admissions Service, the Virtual School and when appropriate with the Statutory Assessment Team to secure a full-time school place as quickly as possible.

The Raising of the Age of Participation now requires young people up to the age of their 18th birthday to participate in a package of Education, Training or Employment with Education. If any young person living at Dahlia House is not participating in an appropriate package, staff from the home will work with them, the Virtual School and Career Connect to secure an appropriate placement as soon as possible.

The staff at Dahlia House will always promote the importance of education, training and employment. They will use wide ranging strategies to support good attendance at school and will work with the young person's school, social worker and virtual school if required to identify and overcome any barriers.

Staff will demonstrate the clear expectation that each young person goes into school on time every day. They will establish daily routines to support the young person living in the home to be up on time, dressed in uniform and fully prepared with all the equipment they need for that day. If a young person is too unwell to attend school staff will always ring the school that morning to inform them that they will be absent and to advise them when they anticipate the young person will be returning to school. Staff will also contact the Designated Teacher to advise them of any circumstances which may affect a young person's ability to fully engage with learning that day. Staff at Dahlia House will find opportunities daily to talk to each young person about how they have gone on at school that day, homework to be completed and any support they might need.

The staff at the home will ensure that each young person has the appropriate study space and all the equipment they require to complete their homework.

The Person Education Plan (PEP) is the statutory tool to ensure that everyone is actively prioritising the education of the Young Person, up to the age of 18yrs, carefully tracking their progress and supporting them to attend, achieve and to be inspirational. Staff at Dahlia House will always attend each young person's PEP meeting and support and encourage the young person to attend and contribute to the development and review of their plan. If for any reason the young person does not wish to attend the staff will ensure that the young person's views are shared at the meeting and inform the development of their PEP. The staff will then share the content of the discussion and agreed actions with the young person.

Any concerns about the young person's ability to access learning will be raised in a timely way both through the PEP meetings or at additional meetings with the Designated Teacher as required. A copy of the young person's PEP will be placed on their file.

The home will always promote school stability for each young person. If however, for any reason a child must change school the Social Worker, whenever possible should always ensure that a new school place has been secured before moving a child from their current school and that the school they move to is, wherever possible, judged by Ofsted to be Good or better. The staff at Dahlia House will ensure that the Virtual School is informed of any potential school move.

The staff at Dahlia House will attend parents/carers evening and other school events in appropriate partnership with parents and carers and social workers. They will support each young person to participate in all extra-curricular opportunities which will enhance their learning and support them to identify and pursue their aspirations for the future. The home will recognise and celebrate any achievements of any young person as they occur and in ways that are meaningful to that young person.

For those young people who are entering or already participating in post 16 education, training, or employment the staff at Dahlia House will work closely with the young person, their social worker, leaving care worker and the Virtual School to ensure a high quality and effective post 16 PEP is in place and that this fully informs the development of an effective pathway plan. Staff will continue to support young people to maintain positive routines which ensure they are punctual, have good attendance and achieve well.

Section Four – Enjoyment and Achievement

13. Enabling children to take part in a range of activities to be creative and intellectual and develop their physical and social interests and skills

The staff at Dahlia House aim to provide a range of experiences, opportunities, and activities to meet individual physical, emotional, social, behavioural, psychological and educational needs of our young people living in the home. Birthdays, cultural and religious festivals are also celebrated where appropriate. All our young people are encouraged to plan their own weekly activity programme with support and guidance from staff. Where required staff will research activities requested by the young people and organise such activities if deemed appropriate and subject to risk assessment. Our young people also can select newspapers, magazines, books, music and games subject to suitability on a weekly and monthly basis.

The home understands the importance of play and social normalisation; therefore, we encourage and support young people to make and sustain friendships. The staff at Dahlia House welcome friends for dinner as well as organised social activities. Staff have a good understanding of the range of influences that friendships can have and encourage those with a positive impact and discourage those with a negative impact. Activities need to be carefully planned to balance realistically with those other children and young people would receive in a family home whilst ensuring opportunity to experiences of childhood that may otherwise have been missed.

Section Five – Health

14. Healthcare and therapy.

Psychological and Clinical Support.

Our in-house Psychology Service works closely with the home to develop and embed our Safe Steps Approach. The Therapy team are Clinical Psychology led and are specialists in providing therapeutic support to Residential Childcare Services.

Therapeutic Input for the home

The current evidence base indicates that the most effective way of supporting safe relationships for young people of all ages is by providing interventions that support their carers to understand and reflect on the meaning of the child's behaviour and recognise its impact on themselves. The primary method for therapeutic input to the home is therefore based around providing support to the teams and managers.

This includes

- A weekly informal visit to the home by the registered clinician
- A monthly team consultation
- A monthly Managers Check In
- Ad hoc support at times of increased difficulty

Psychological Consultation.

Psychological consultation will include a scheduled meeting with the entire supporting team and the managerial team. During these visits the clinician will:

- Start the assessment process.
- Discuss the risk factors within the placement and address any ongoing concerns with staff pertaining to the young person's emotional health and psychological well-being.
- Update and review the young person's Therapeutic Support Plan centred around the identified key therapeutic tasks.
- Encourage and support the staff to use reflective practice, helping them to consider the challenges and obstacles they may be facing in caring for the young people.

- Deliver bespoke therapeutically focussed training and additional relevant resources as needed to support the therapeutic approach of the staff.

Psychological Assessment & Formulation

Through the consultation process, a formulation and psychological understanding of the young person will be co-produced with the team within the home for each young person. This formulation will underpin the Therapeutic Support Plan which makes recommendations for the person's ongoing care within the home, as well as any present or future needs from the system and/or individual therapeutic approaches. This plan will then be reviewed and updated monthly in line with the discussions held in consultation.

The formulation process will include a review of known history, discussion of presenting difficulties, and consideration of their underlying psychological, emotional and developmental needs. Where the young person wishes to be included in this process, this will be accommodated through direct sessions with the Registered Clinician. The young person will also be offered chance to have sensitively provided feedback around their Therapeutic Support Plan should they wish. We believe that young people should be empowered to be involved in their care but also that this should be available to them only in ways which enhance their emotional safety and require their consent.

Staff Training and Foundational Knowledge

Team members within Dahlia House receive a comprehensive training package developing their therapeutic skills. This includes an Introduction to Therapeutic Practice as part of their induction. In addition, staff members with six-months of practice attend Advanced Therapeutic Practice training which further explores our model and how it can be put into practice.

Additionally, during consultations specific workshops can be completed around relevant issues to meet ongoing training needs. The psychological therapist also supports the development of reflective practice in the home, to support staff to emotionally connect to young people and the work and to develop resilience in working therapeutically with young people who have experienced significant trauma.

Therapeutic input for children & young people

Evidence-based practice indicates that interventions based on staff practice are the best use of clinical resource when supporting young people who have experienced relational trauma.
However, direct therapeutic work may be beneficial for young people who have built on their emotional safety and are now in a place to mourn losses, process traumatic experiences or focus on cognitive based interventions. Comprehensive psychological assessments can be completed when indicated and direct therapeutic input can be facilitated if there is clinical need.

Therapy for young people who have experienced trauma is often offered on a long-term basis as we know children and young people who have experienced

trauma often have a fear of intersubjective relationships. Therefore, before beginning work with a young person, it may be relevant to spend informal time with the young person developing a therapeutic rapport and supporting them to feel comfortable. We place significant importance on co-creating therapeutic goals with the young person, ensuring that they are invested in the therapeutic relationship and that goals are meaningful for them. We know that therapy can be difficult for young people and at times throughout the therapeutic process young people may disengage from the therapeutic process, using in house services allows for flexibility or provision and reduces known barriers of access to services.

Holden Knight's Therapy Service do not operate as a crisis service, practitioners act as the Clinician for the home primarily, unless risk arises during direct individual work, clinical risk is managed by the home staff team.

Therapeutic Delivery Staff

Dr Louise Hendry, Lead Clinical Psychologist (DClinPsychol, MSc, BA(hons)) is the registered Psychological Practitioner supporting Dahlia House, she also serves as the Head of Therapy for Holden Knight and is responsible for embedding therapeutic practice across the company.

Dr Hendry is registered with the HCPC (HealthCare Professionals Council) and holds a Doctorate in Clinical Psychology. She is also well versed in neurodevelopment and completed an MSc in Developmental Disorders. Dr Hendry has a particular interest in supporting Looked After and Accommodated children and young people and has previous experience as a Residential Support Worker/Deputy Manager of solo residential homes prior to training as a psychological practitioner. As a Clinical Psychologist her previous experience includes working as a Senior Psychologist for a nationally based Residential Care Provider, and she has developed and evaluated the impact of training for Residential Support Workers which has been published as a peer reviewed article – see Hendry et al. (2022). Dr Hendry is a trained supervisor who is eligible to join the Register for Applied Psychology Practice Supervisors (RAPPS) and has previous experience of supervising Assistant and Trainee Psychologists.

Dr Hendry is supervised by Emma Williams, Consultant Forensic Psychologist (BSc (Hons.), MSc, CPsychol, AFBPsS, EuroPsy) Ms Williams is based externally to Holden Knight and provides supervision through Williams Psychology monthly www.williams-psychology.com.

The Clinical Staff team

Integrated therapy services are delivered to the home, including consultancy for residential staff, training and support for staff teams, liaison with external agencies (e.g. social services, CAMHS) and systemic outcomes monitoring.
Support for residential staff is offered by the team, in line with guidance from the British Psychological Society, NICE Guidelines and HCPC. Our clinicians also have access to a combination of individual clinical supervision and Continuing Professional Development (CPD). The Holden Knight Therapy Team have access to

regular CPD events and are funded to maintain relevant subscriptions for their ongoing learning and access to clinical resources.

- **Health**

Individual health care needs are identified prior to admission and arrangements for continuity of medical care are recorded in the Placement Plan. Confidential health records maintained for each young person include details of any health problems or illnesses, prescribed treatments and the administration of medication. All young people are supported to remain with their current doctor, dental practice and opticians but if the distance is too far, we register them with the local doctors and dentist if they have availability, and the opticians at Specsavers within 7 days of admission. The home will work in collaboration with the Looked after Children's Nurse. In addition, any other support and health needs accessing bespoke guidance and training to support around these.

- **Medication.**

All medications including those that can be obtained without prescription are handled appropriately and stored safely in a lockable cabinet in a locked room. All staff are trained in the safe administration, storage and disposal of medication and comply with the residential service Medication Policy.

- **Exercise.**

Every effort is made to ensure young people can maintain their interests and hobbies and are encouraged to try out new opportunities they may not have experienced previously. Young people will be encouraged to take regular exercise and to positively engage with chosen activities. Staff will actively promote and support young people when engaging in such activities.

- **Diet.**

Young people living at Dahlia House are encouraged to eat a well-balanced diet. They are involved in the preparation of menus on a weekly basis, assist with the weekly shop and participate in the preparation and cooking of food. This also allows for young people to develop independence skills. Young people in our care are also

encouraged to try new cuisines, and all personal tastes are accommodated for, subject to health monitoring and individual needs.

- **Personal Hygiene.**

Young people will be provided with guidance, advice and support on health and personal care issues appropriate to their needs and wishes. Young people choose their own toiletries and personal hygiene products and regularly go shopping with the staff team. Staff discreetly monitor standards of personal hygiene and provide guidance and encouragement where needed. Any specific concerns are raised in the young person's placement plan with clear strategies on how to best manage this, allowing the staff team to follow and understand the appropriate support to be used.

- **Smoking/Vaping**

It is against the law to smoke in the home. Guidance is given to all young people on related health risks and support is offered to young people wishing to give up the habit. We do not give young people under the age of 18 years permission to smoke.

- **Alcohol and Drug Misuse.**

The consumption of alcohol and the use of drugs is not permitted within the home. Staff provide advice and guidance on the risks associated with drug and alcohol misuse to educate our young people living in the home of the potential effects both can have upon their health. If specific concerns are identified a referral would be made to the relevant local area support services.

- **Sexual Health.**

Levels of awareness and risk are assessed on arrival by information supplied by social care and other agencies involved in the care of the young person. Advice and support are available from staff through key work sessions. If specific concerns are identified a referral would be made to the appropriate service, these include local sexual health clinics and family planning centres.

- **Health Education**

The staff at Dahlia House are required to promote a healthy lifestyle and act as a positive role model. Access to specialised guidance and support is arranged as necessary and staff will routinely focus on health issues such as sexual health, sex education, family planning, and alcohol and substance misuse information, etc. Staff will actively promote all aspects of healthy living by working alongside professionals to ensure that the young people in our care are supported and informed surrounding decisions that are made.

Section Six – Positive Relationships

15. Promoting contact between children and their families and friends.

Dahlia House recognises the importance to young people of positive contact with those who are important to them. The level of contact varies greatly from one individual to another. If there are any restrictions on contact this will be addressed at the planning stage and support offered where necessary. All arrangements for contact with family and friends will be arranged prior to admission to the home. If this is not possible arrangements are finalised on admission to the home. There may be restrictions on some families contact. If this is the case it will be explained to young people and their families prior to admission.

We welcome family time at the home and visitors will be offered the opportunity to share meals and refreshments. Young people and their visitors will be shown to a quiet space to talk in private, dependent upon the levels of supervision required. Before visitors can gain access to the home, staff will ensure that they have seen proof of identification. If the visitor is unannounced or is unable to provide identification, then entry will be refused. All visitors will be asked to sign the visitor's book.

If it is more appropriate, staff will support family time at a venue away from the home and can provide supervision of the young person throughout. We will support young people as appropriate before, during and after family time, as this can be a very challenging time emotionally for the children in our care. We recognise the impact of attachment related issues and staff at Dahlia House ensures that there is good communication between parents and the home and young people and the home on how the family time went.

All family time arrangements are recorded on young people's files in the home.

The home will support and facilitate phone contact, access to private calls may be withdrawn when necessary (e.g. due to child protection concerns) and instead be made under the supervision of carers.

Young people living at Dahlia House are encouraged to make friends locally as well as retain friendships from previous homes where they have lived, their education

provision or activity in the community. These friends will be welcome to visit the home in consultation with staff and the young person.

Section Seven – Protection of Children

At Dahlia House, protecting young people is our priority. Staff complete key work sessions surrounding CSE, CCE, appropriate relationships, internet safety etc. where it is appropriate to meet such individual needs of the young person.

16. Monitoring and surveillance

The front and back doors are alarmed to alert staff if anyone leaves or enters the building. This is to help with security and reassurance for young people and staff. The house has alarms in place on the young person's bedroom which will be activated at night once the young person is settled in bed if needed, this will alert the staff to any movements within the building. This is reflected in the young people's placement plans and young people's guide and is agreed by the placing authority. There is no internal surveillance.
At Dahlia House we have a ring doorbell which is placed on the door at the front of the home. This is to monitor any visitors who may attend the home but additionally this gives the home additional security measures. This is the only surveillance camera at the home, and we will always reflect additional security measures in a young person plans and the homes children's guide whilst at the same time sharing this information with placing authorities.

17. Behaviour support

Dahlia House have committed to using a trauma informed approach as the overarching process by which all rewards and consequences are considered. Furthermore, the home commit to engaging with every young person as an individual and as such, each reward or consequence may look very different from person to person based on need.

The ethos of the home ensures that a warm caring, therapeutic environment will be created. Consistent boundaries will be in place which will make young people living in the home feel safe and secure. Relationships are key for the young people living in the home to feel safe, staff in the home, work hard to develop relationships with the young people living in the home. Sanaa House places great emphasis on

recognising and rewarding a young person's efforts and in helping them to develop self-esteem, self-control and self-worth. The staff recognise that young people who are experiencing difficulties in their lives may act in way that can be perceived has challenging as a means of expressing their feelings.

The behavioural boundaries set are both appropriate and realistic. All staff are trained in CPI where the emphasis is de-escalation and diversion techniques, this training places emphasis on using de-escalation techniques to manage young people when they become upset or angry and present in a way that can be perceived as challenging. All the staff working in the home are aware that physical intervention is to be used only as a last resort.

It is acknowledged that the use of physical intervention, if it can be used safely, may be necessary if there is a serious risk of significant harm to the young person or others, or a risk of serious damage to property. Each young person in our care has a behaviour support plan which recognises behaviour and potential triggers and how best to verbally intervene without the need for physical restraint. In making the decision to use physical restraint techniques staff will consider any history of abuse, phobias, size and maturity, physical health and state of mind, the possible influence of drugs or alcohol and the need to consider the safety of those around them. Physical intervention will only be used as an act of care and behaviour management and not a punishment. If a physical intervention proves to be necessary the young person will whenever possible, be informed first. Physical interventions are only to be used to maintain the safety of staff and young person.

The young person involved in any incident of restraint will be invited into a conversation (when ready) by any member of staff involved. The reasons why they were restrained will be discussed with the young person, at their level of understanding, and they will be asked for their views and feelings. This conversation will be recorded. The young person will also be offered medical assistance, if appropriate, and will be encouraged to accept this. All staff and young people involved in any way will be debriefed about the incident and strategies put into place to avoid recurrence.

All incidents where restraint is applied will be recorded. Copies of the Physical Intervention will be sent to relevant professionals/parents/carers and a copy placed on the young person's confidential file.

- **Self-Harm.**

Staff within the home recognise that young people in care are often at higher risk of self- harm than other young people. Young people living in the home who present with self-harming behaviours will have a comprehensive risk assessment and safety plan in place. An A&E hospital passport will be considered for all young people where there is a high likelihood of attendance at hospital. This will guide hospital staff on how to support that young person. As part of the induction staff will have received training which includes managing ligatures.

- **Room Search.**

For the safety of the young person living in the home there may be a time that staff will need remove personal belongings that they believe may be a danger to the young person. A record of any room searches and the reasons for it will be kept, any items removed will be recorded and signed by the person completing the search and the young person.

- **Consequences.**

Therapeutic, trauma informed parenting supports young people with decision making and provides an extra layer of behavioural support when needed to help the young person achieve and make safe choices. The use of logical and natural consequences is incorporated into the home's approach to help the young person learn cause and effect, to learn to take responsibility for their actions and help them learn that behaviours do have consequences, whether positive or negative. Consequences are presented to young people in a nurturing and supportive way and are not a punishment. They are there to scaffold the young person and help them develop appropriate skills and make safe choices. Young people are asked for their views on appropriate consequences to their actions. Staff are encouraged to use and think about natural consequences to actions to ensure it has the right impact and outcome for the young person to learn from their experience.

- **Disclosure and Allegation of abuse.**

The safety and well-being of the young people placed at the home is the primary concern and their welfare is paramount. All staff members are familiar with the Child Protection Policy on induction and undergo further Safeguarding training to ensure they have knowledge and skills to identify any causes for concern and deal with disclosures and allegations of abuse.
If a young person discloses to a member of staff, they will be advised that the information will have to be shared with the Manager, social services, and the police if necessary. Young people must be listened to and enabled to report any allegations at the earliest opportunity.

- **CSE and CCE**

All staff undergo CSE and CCE training and regular safeguarding training. Each young person is cared for differently in accordance with their needs in terms of safeguarding, CSE and CCE. Dahlia House, work closely with local authorities, and public services to formulate personalised plans to protect each young person.

Section Eight – Leadership and Management

18. Registered Provider and Manager's contact details

Registered Provider:

Holden Knight 13434564
200 Brook Drive,
Reading
RG2 6UB
www.holdenknight.com

Registered Homes Manager

Kelly started working with Holden knight in April 2024. She has over 20 years' experience working with vulnerable adults and children with a diverse range of needs. Kelly more recently was a Registered Manager for a therapeutic placement for children and young people with mental health disorders. Kelly has completed her level 5 diploma in leadership and management.

Responsible Individual:

Peter started with the Organisations in August 2023 as the designated Responsible Individual. Peter has worked in residential childcare for 22 years so has a vast amount of experience. Peter has held a variety of roles when developing and managing children's home services. Peter holds the following Qualifications: Level 5 Diploma in Leadership and Management CYP A1 Assessors Award, NVQ 4 Caring for Children and Young people, and NVQ 3 Caring for Children and Young People. Peter is the Designated Safeguarding Lead.

19. Experience and qualifications of staff

Dahlia House has a dedicated staff team who are responsible for the effective care and development of the young people living in the home. Holden Knight recognises that to meet the complex and varied needs of young people living in the home; staff must have appropriate training, well-developed skills and access to clinical support and consultation. All staff complete a comprehensive induction programme which includes mandatory training in safeguarding, equality and diversity, positive handling, fire safety, food hygiene, administering medication and GDPR. In addition to the mandatory training specialist training forms part of the induction to ensure that staff have the skills and knowledge to support young people living in the home. Continued staff development is further assisted by regular supervision, staff meetings and psychologically informed consultation with the home's allocated clinician.

20. Management and staffing structure and support

An example staffing structure is provided below but for full details of the staffing structure within the home, please see Appendix A.

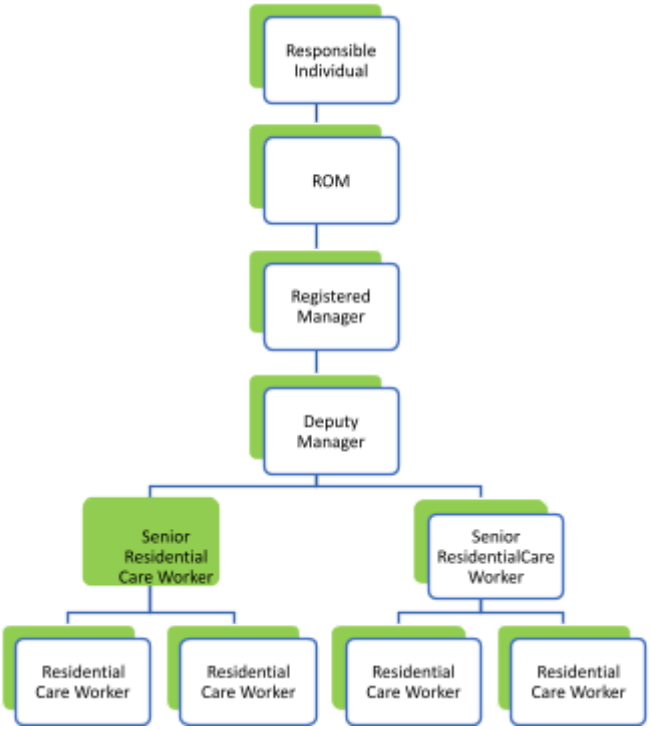
In the recruitment and selection process, all staff are checked for their suitability to work in the home under Schedule 2, including DBS, reference checks and employment history. All staff working in the home must complete a six-month probationary period.

The rota is designed to always have a minimum of two staff on duty, rota shifts are in accordance with the needs and operation of the home, considering the needs of the young people at the time. Waking night staff are only present if a specific request is made by a placing authority, or if an assessment following an event / occurrence identifies the need for a waking night member of staff to be present within the home

The rota will consider a gender and skills balance to meet the needs of the young people wherever possible. The recruitment process tries to ensure a balance of carers from different ethnic and cultural backgrounds.

Staff supervision and team meetings occur on a regular basis and are planned. In addition to this all staff receive annual individual appraisals which then allows for personal development plans to be completed. These plans set clear aims and objectives and guidance for the individual to achieve over the forthcoming year.

21. Promoting appropriate staff role models



Positive social role models with life experience are an important part of our recruitment programme and feed into our training and development structure. Dahlia House have a diverse, skilled, and dedicated staff team who are responsible for the effective care and development of the young people in our care.

The staff at Dahlia House aim to inspire and lead a culture that: -

• Helps young people aspire to do their best and promotes their welfare.

• Staff work in a way that delivers the approach, ethos and outcomes set out in the home's statement of purpose and demonstrates a vision for the home.

• Ensure that each young person receives care from a stable and sufficient workforce that is well supported and provides a consistent approach to care.

• Staff to understand the impact the home has on the progress and experiences of each young person and uses this knowledge and understanding to inform the development of the quality of care in the home.

Staff to understand and be involved in the transition to the young person's next home.

Section Nine – Care Planning.

Admission of children to the home, including emergency admission

The staff at Dahlia House recognise that admission of a new young person, can be a difficult time and we aim to make any introduction to the home as smooth as possible.

When a young person is referred to Holden Knight, the Referrals Department will take the initial details from the relevant placing authority. During the referral process, we use an impact risk assessment to assess whether we feel we could meet the needs of the young person. We may ask the placing authority for more information to inform our decision making.

Placement Criteria.

Dahlia House is a solo home and provides care for one young person who presents with social, emotional and mental health needs, mild learning disability and diagnosis of Autism/ADHD.

We are unable to offer placements to young people who.

- Breach the conditions of the registration
- Would be inappropriately matched.

Referrals process.

- The Local Authority of the young person is required to complete a placement referral form and forward to the Holden Knight referrals, who will then forward to the Registered Manger.
- Meeting to be convened with Local Authority to obtain further information.
- Impact risk assessment to be completed to assess if the home can meet the needs of the young person.

If the Registered manager believes that home can match the needs of the young person a placement offer will be made.

The Social Worker is required to provide to the Registered Manager a signed valid Consent to Placement and Medical Treatment form prior to admission.

The key worker and a designated member of the management team will oversee the admission. The child will normally be supported to visit the home and come for tea before the admission date.

A risk assessment is completed prior to admission to the home.

It is anticipated that some placements will be emergency admissions. In these circumstances the Registered Manager will obtain the fullest information possible from the referrer to allow a decision to be made and ensure the following conditions are agreed/met:

- Emergency admissions will be on a trial basis
- Planning meeting arranged within 72 hours
- There must be a named social worker with case responsibility.
- All appropriate paperwork is provided.

Appendix A – Staffing Structure.

Staff Member	Job Title	Start date	Qualifications	Experience
