MONTAGUE HOUSE

STATEMENT OF PURPOSE

OFSTED REGISTRATION NUMBER: 2796314
HEAD OFFICE: 1 MALING COURT, UNION STREET, NEWCASTLE, NE2 1BP
REVIEW DATE: 2RD MAY 2025

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Acedia Care Ltd. Company Registration number 15049217

WELCOME TO MONTAGUE HOUSE WHERE OUR AIM IS TO CREATE A NURTURING AND EMPOWERING ENVIRONMENT WHERE CHILDREN AND YOUNG PEOPLE CAN BE SUPPORTED TO FLOURISH AND REACH THEIR FULL POTENTIAL.

The Statement of Purpose outlines the key aspects and vision of our children's home. It encompasses our commitment to providing high-quality residential care and support to a child or young person with learning disabilities and/or complex needs. We refer to complex needs in line with some of the findings from Ofsted's report titled "How Local Authorities and Childrens Homes Can Achieve Stability and Permanence for Children with Complex Needs" (dated 16th January 2024), categories of need will include, behavioural, learning, safeguarding and social needs.

ORGANISATIONAL OVERVIEW

ACEDIA Children's Homes is a newly founded organisation; creating a safe nurturing homely environment for a child or young person with learning disabilities and associated complex needs.

Our vision is to: -
Empower
Develop
Grow

QUALITY & PURPOSE OF CARE

The range of needs of the children for whom it is intended that the children's home is to provide care and accommodation.

At Acedia, we provide care and accommodation for up to one child or young person per home, aged between 8-18 years of any gender. The primary needs of the child or young person living at Montague House will be a Learning Disability and we recognise this may co-exist with other complex difficulties and learning difficulties and/or autism. Complex needs can be defined as a number of different areas: Behavioural, Learning, Safeguarding & Social.

THE ETHOS AND OUTCOMES AND HOW WE WILL ACHIEVE THEM

At Montague House, our ethos is simple; we are creating a safe nurturing homely environment. We strive to create an inclusive and nurturing environment where the child or young person feels valued, supported, and empowered.

We recognise the importance of a positive workplace culture and strive to embed our primary values and ensure these are at the root and forefront of decisions made at all levels of the organisation, establishing congruence for the operation of the organisation and growth for children and young people and the supporting adults alike.

Our ethos is guided by a set of values that underpin all our interactions, decisions and practices.

Caring for personal GROWTH

We are deeply committed to providing a caring and compassionate home where young people feel safe, nurtured and loved. We prioritise emotional, physical and psychological well-being; recognising that a nurturing atmosphere and suitable living environment are essential to harness a felt sense of safety, which is crucial for individual growth and development.

Collaboration to Develop

We believe that collaboration is essential in providing the best care and support for children and young people. We actively foster partnerships with children and young people, their families, and external agencies to create a unified and holistic approach to their well-being and development. By working together, we can empower individuals to contribute towards their care regardless of any limitations, whilst welcoming expertise and resources from the wider network to enhance the outcomes for the child or young people in our care.

Empower

We recognise the importance of an evidenced-based approach alongside a growth mindset. We are also mindful of developments in research and practice and seek innovative and forward-thinking solutions, to ensure that we remain at the forefront of childcare practices, enabling us to provide the highest quality of care. We will empower them for success at their own pace to make sure the small wins are recognised and developed.

We recognise that children and young people come with diverse histories, backgrounds, experiences, and challenges. Therefore, we embrace adaptability in our approach to meet the changing needs of each child or young person. We continually assess and adjust our strategies, interventions, and resources to ensure that they remain relevant, effective, and responsive to the evolving needs of the child or young person in our care.

Putting the child or young person at the centre of everything we do is a fundamental principle of our ethos. We prioritise their individuality, rights, and interests, ensuring that their voice is heard and respected. We actively involve children and young people in decision making processes, allowing them to contribute to their care plans, set goals, and make choices that empower them to shape their future.

Our approach to care is behaviour led, recognising that behaviours are a form of communication. We strive to understand the underlying reasons for behaviour and address them with empathy, patience, and evidence-based interventions.

We are committed to empowering children and young people to develop the necessary skills, resilience, and self-confidence to navigate challenges and embrace opportunities, with the aim of helping them to develop a range of healthy coping mechanisms, including emotional and physical regulation skills and positive social interaction skills.

We are committed to providing long term stability and support to children and young people, extending beyond their time in our care, ensuring lifelong links to support lasting positive relationships. This will also be supporting and maintaining connections with families to ensure a seamless journey into adulthood where possible.

THE ACCOMMODATION OFFERED BY THE HOME

Sensory issues can make up an enormous part of the profile for any child or young person with learning disabilities and/or additional complex needs. This can result in sensory sensitivity affecting one or more of the five senses: sight, sound, smell, touch and taste. The senses may be hypersensitive, which means they are overly sensitive to stimuli, or hyposensitive which means they are under stimulated. These sensory differences can have a major impact on an individual. We implement strategies from an ideological perspective as an organisation to ensure we meet the specific needs of the child or young person. This cascades to the delivery of care within the home and sensory profiling contributes towards care planning and the physical environment of the home. Routine, structure and predictable care also contribute towards managing the setting conditions.

The property offers a living room , open plan kitchen and dining area and managers office located on the ground floor and upstairs the home offers 4 bedrooms which includes one large bedroom for a child or young person , a second room for the child or young person which can be developed into a bespoke room such as a sensory room or playroom , there is a staff bedroom and ensuite facilities . There is also separate bathroom upstairs. We have a spacious secure garden at the back of the home and a garage at the front of the home.

THE LOCATION OF THE HOME

Kenton in Newcastle upon Tyne.

Montague House is located on a residential street in North Kenton, North Kenton is a suburban housing estate located in the City of Newcastle upon Tyne, in Tyne and Wear, England. It lies northwest of the city centre and to the east of Kingston Park. The area is known for its strong community spirit and features a refurbished park, a sports centre, and bus connections to nearby areas and hospitals. There are great clinks to Primary education which is provided at Mountfield School and St. Cuthbert's Primary School, while Kenton School serves as the local high school. There are reliable nearby public transport links to connect to the city centre, coastal areas, and the countryside.

SUPPORTING THE CULTURAL, LINGUISTIC AND RELIGIOUS NEEDS OF CHILDREN

Meeting the cultural, linguistic, and religious needs of the young people is of the utmost importance to us at Acedia.

We also recognise the importance of understanding our own backgrounds and cultures as adults and therefore we recruit adults from a diverse range of upbringings, culture and heritage to promote cultural understanding and sensitivity.
We encourage children and young people to explore and embrace their individual cultural and religious identities, providing them with support and resources to practise and follow their chosen cultures or religions.

By promoting an inclusive environment, we can create a space where young people feel free to express
their beliefs.

Engaging with families and the wider community and seeking training for the team where required, this allows us to gain insights into specific cultural practices and religious observance, ensuring appropriate support is in place.

HOW TO MAKE A COMPLAINT

We understand that complaints are an important aspect of ensuring transparency, accountability, and continuous improvement in our home.

In circumstances when anyone may become unhappy with the services or support, they are receiving, we actively encourage their use of our complaints system. All complaints are taken seriously. Montague House will always ensure that all complaints are verified and dealt with according to our complaints policy. All young people will have a right to be represented by their elected advocate if they wish.

To address any concerns or complaints, we have a comprehensive complaints procedure in place, which can be provided upon request. All complaints brought to our attention are taken seriously and thoroughly investigated.
We strive to resolve complaints in a fair, prompt, and satisfactory manner, ensuring that the voices of individuals are heard, and their concerns addressed. Our goal is to foster an open and responsive approach where concerns are addressed promptly and in a manner that promotes positive outcomes for all involved.

In situations where an individual is dissatisfied with the outcome of a complaint, we have an additional procedure in place to review the matter further and explore alternative resolutions.
On admission to the home, the child or young person will be given a Children's Guide, which has guidance on how to raise a complaint. We will ensure this information is provided in a format which aids understanding dependent on the cognitive ability and individual needs of the child or young person.

A copy of the home's complaints procedure is readily available for a child or young person and their families including placing authorities. Complaints may also be raised externally with external bodies as desired. The complaints process is made freely available within the service.

Complaints can also be made to any of the following:

Registered / home manager to be contacted first however if they are not available, please contact the Responsible Individual .

HOME MANAGER
Aimee Knox:
T: 0191 6462100/ 0737 622 8967
E: Aimee.Knox@acediacare.co.uk

RESPONSIBLE INDIVIDUAL
Kerry Duerden:
T: 0191 646 0101/ 07507 688 551
E: Kerry@acediacare.co.uk

Ofsted
0300 123 1231 or enquiries@ofsted.gov.uk

Complaints and Customer Relations Team – Newcastle Local Authority
Freepost RSXR-YGCJ-KKHK
Newcastle City Council
Floor 4
Civic Centre
NE1 8QH
Telephone: 0191 277 7427
E-Mail: complaintschildrens@newcastle.gov.uk

The Children's Commissioner's Office
Sanctuary Buildings
Great Smith Street
London
SW1P 3BT.
The email address for complaints is: info.request@childrenscommissioner.gov.uk
Please put 'Formal complaint 'in the subject line.

HOW TO ACCESS OUR CHILD PROTECTION AND BEHAVIOUR MANAGEMENT POLICIES

Our Child Protection and Behaviour Management policies are available within the home or can be requested from the Registered Manager or Responsible Individual.

VIEWS, WISHES & FEELINGS

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

Children's views, wishes and feelings are at the forefront of every decision made in our home. Children will be regularly consulted, based on their needs and level of understanding. We understand that children communicate in very different ways, and our approach will vary based on the individual in our care. We are innovative in our methods of gathering feedback from young people and other people involved in the child's life. We embrace technology, and understand children now communicate effectively in the electronic world. In a world of smartphones and tablets, we ensure that we utilise these communication methods in gaining the young people's views, wishes and feelings, where appropriate. There may also be a need for verbal and non-verbal communications, which might include picture cards systems, such as PECS and Widget Symbols, or signing such as Makaton. Our child or young person will have the option to participate in 'house meetings' which we will name "family meetings "to discuss matters regarding the home and contribute their views. With the aid of communication tools, along with a team of adults who are effective at building relationships with children and young people, we will ensure children maximise their participation in the planning of their own care.

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

At ACEDIA CARE, we pride ourselves on inclusivity, irrespective of religion, culture, orientation, and ability. We do not judge, and we ensure that the child or young person in our care learn how to become tolerant of others. The staff team challenge any form of discrimination and restorative and educational work is facilitated.

At ACEDIA CARE, we strive to ensure that all children and young people receive the same benefits as others in all aspects of life. Any discrimination towards children, young people or adults will be challenged.

Similarly, we ensure that all staff are treated as individuals by providing provision to ensure that everybody has fair access to equal opportunities.

Children and young people will also be encouraged to develop an understanding of their individual roots and culture to develop their own identity. We also carry out individual work with young people to help them gain knowledge of discriminatory factors and to develop their sense of self.

The child or young person in our care will be made aware of their rights and how to access independent advocacy services, their Independent Reviewing Officer, Children's Rights services and Ofsted.

Our principles of practice endorse the UN Convention on the Rights of the Child, and the team ensure all young people enjoy the rights and freedoms set out in the convention. All young people have the right to feel safe, happy, cared for and listened to.

Children's universal right to participate is enshrined in the United Nations Convention on the Rights of the Child (UNCRC), which is summarised in these four principles:

•Non-discrimination
•Best interests of the child
•The right to survival and development
•The views of the child.

Mind Of My Own explicitly upholds the four principles in providing a simple and inclusive way for children's views to be heard and their safety and best interests preserved. We are delighted that we will be using Mind of My Own at Montague House

CARE PLANNING

ADMISSIONS TO CHILDRENS HOME AND EMERGENCY ADMISSIONS

Prior to a child or young person moving into the home, there is an assessment and impact process to ensure the suitability of the home, including the environment, skillset of the team and compatibility with the Statement of Purpose, Workforce Development Plan, Location Risk Assessment and needs of the young person. Assessments will consider care needs, including health, educational, behavioural, and associated risk factors. A transition process will follow, and this will involve introductions, allocation of a key worker and visits to the home.

We do not accept emergency admissions into the home.

At ACEDIA CARE, care planning for a child or young person will be founded on our key principles of being caring, collaborative, conscientious and progressive. We will actively involve the child or young person and include their families and the wider multidisciplinary team to ensure a holistic package of care that promotes the best outcomes. Care planning will be continuously monitored and reviewed as necessary, allowing us to learn from mistakes and maintain a growth mindset to support progress and development.

This also includes multi-agency work, and we work closely within the wider system to ensure collaborative care planning is in place to meet the needs of the young person. Statutory Looked After Reviews and other systems in place support the care planning process.

POSITIVE RELATIONSHIPS

Promoting contact between children and their families and friends.

At ACEDIA CARE, we recognise the importance of positive relationships in the lives of children and young people. We encourage and support appropriate family arrangements and facilitate time with family in various settings. We work closely with social workers to maximise opportunities for the child's growth and development, maintaining regular contact through visits and phone calls. Copies of reports are shared with social workers to maintain a positive working relationship. Parents, guardians, and significant others are encouraged to participate in the child or young person's welfare, with involvement varying based on individual circumstances. The home actively facilitates family time and encourages attendance at reviews and decision-making meetings. Visits from parents and significant others are welcomed. Constructive contact with family and friends is encouraged, and staff provide support to facilitate communication. When family and friends visit the home, refreshments are provided, and privacy is ensured if appropriate in line with statutory plans.

The team will record information by using Clearcare software, Clearcare has many benefits and can help staff to record, analyse and securely share care data easily. This specialist care software enables us to build, and most importantly evidence, a complete picture of care delivery.

As Montague House is a home for one child or young person, we will ensure that there is an opportunity for the child or young person to spend safe and fun time with other children and young people outside of education to build and maintain friendships.

EDUCATION

Supporting children with special educational needs.

Educational curriculum and the arrangements for education.

Promoting educational attainment.

Where possible, we will aim to ensure current education arrangements for a child or young person can be arranged to provide consistency at a time when they are moving into the home. In the absence of a child or young person having suitable education provision, we ensure at Acedia, will have access to an educational package as a priority of moving into the home. This will act as an interim measure until the most appropriate educational provision is sourced. The team has good knowledge and positive relationships with the local virtual head teacher and a good understanding of the local educational landscape.

The team also recognises that education does not end at the school doors. We ensure that each child or young person has an opportunity to engage in an enriching programme of educational activities both at home and in the community. The team will always ensure the child or young person are ready for school, with the correct equipment, and relevant support with travel and homework. We also recognise that friendships and relationships are built and maintained at school and this forms part of the child or young person's wider identity and belonging.

ENJOYMENT & ACHIEVEMENT

CREATIVE, INTELLECTUAL, PHYSICAL AND SOCIAL INTERESTS AND SKILLS

The home is ideally located to enjoy the absolute best of the Northeast. Within a 30-minute radius, we have coasts, countryside, towns, cities, and national parks. We offer a varied program of activities, appropriate to the child's needs. with the aim of helping children develop skills that may not have been present historically. Resources are provided to ensure that children and young people can try new and exciting activities, sports and hobbies. We learn from disappointment and celebrate success. The arrangements for enabling children to take part in and benefit from a variety of activities that meet their needs and develop and reflect their creative, intellectual, physical, and social interests and skills.

We will endeavour to provide children and young people with an environment that is safe and child centred, where young people's individual circumstances, rights and opinions are respected and listened to.

It is our firm belief that where it is part of a clear plan to meet the individual needs, a period of residential care within a homely environment can be a positive experience for both children or young people and their families. We ensure that we work proactively with children and young people, their families and all relevant professionals to ensure that they have access to the opportunities, resources and support needed to reach their full potential and achieve a positive future.

HEALTH

HEALTHCARE AND THERAPY

The health and well-being of the child or young person is of paramount importance, considering their physical, emotional, and mental health needs. Primary health needs and positive lifestyle choices, including a safe place to live with safe relationships, registration at primary health services, nurture, and support as required, support to attend appointments, medication as needed, exercise and a good balanced diet all contribute to the development of a young person's well-being.

The child or young person will have the necessary support from health professionals including GP, Dentist, Optician, LAC Nurse and other medical professionals as required, based on their individual circumstances.

We also recognise that the child or young person in our care may have more complex health needs, and the team will be trained and equipped to support these on an individual basis. Where external support is required, this will be incorporated within the young persons' care and health plans and a multidisciplinary approach will support the health outcomes for the young person. Internally, we have the support of a Therapy team to support with care planning and environmental management of the home. We also have a PBS lead who will support with care planning, review, evaluation, and behaviour support.

We will also access support from a children's Psychologist who will be there to complete an initial screening and complete full needs assessment if approved by the placing authority and they will provide support to the adults working in the home to ensure the best strategies are understood and met to help the child or young person.

What is the Therapy Teams Role at Montague House ?

As a consultant clinical psychologist Dr (MF) works as part of the therapy team, alongside an occupational therapist (AD) and speech and language therapist (JR). The plan for a child or young person is developed depending on their needs and the agreement with the wider care team.
Most typically Dr (MF) will complete an initial screening, this includes reading background information, spending time with the young person and staff team, and liaising with other professionals involved. (MF) will then write a summary to present an initial understanding of the young person's presentation, accounting for all relevant factors such as learning disabilities, neurodiversity, and developmental trauma. Suggestions and recommendations to inform their care plans are then made.

Alongside this(MF) works together with (AD) and (JR) to develop a positive behaviour support plan.

This brings together the multi-disciplinary perspectives to detail strategies to meet the needs of the young person. Prior to the development of the plan a period of assessment is completed, this might include behaviour recording or observations. A behaviour support plan includes everyday strategies and strategies to manage challenging behaviour. Again, if necessary, this is completed in liaison with statutory services if they are involved in a young person's care. Behaviour support plans are reviewed regularly and amended to remain up to date

.

The therapy team offer a minimum of monthly consultation to the staff team to discuss the children and young people, the challenges, and successes they have faced. Between times periods of assessment such as observation are completed. Individual sessions are offered to the young people, if direct intervention is not required time is still allocated to spend directly with a child and young person to maintain relationships. When serious incidents occur (MF) can meet with the child or young person to offer them a separate space to share their thoughts and feelings.

The adults working in the children home are offered training specific according to any gaps in their knowledge, this can include specific training in child development, trauma, autism, mental health presentations.

Dr (MF) also offers staff support when required, providing debriefs following serious incidents. (MF) can also offer supervision and signposting to staff members who might be finding aspects of their role emotionally challenging. MF works alongside the management teams and senior leadership teams to review the support offered into each home and adapt and respond to need as appropriate.

Who are the Therapeutic Team? Therapy Team Skills, Qualifications and Experience

Dr. MF

Michelle is a Health Care and Professions Council (HCPC) registered Principal Clinical Psychologist, active in the NHS, working with children and families in a specialist mental health service. Within this, one of her specialisms is to work with looked after and adopted children, their families, and agencies around the child.

Michelle completed a BSc Psychology (Hons) at Durham University in 2005, since then she has worked with in Psychology. She developed an interest in working with children and families in 2007 as an assistant psychologist in a Looked After Children's Mental Health Team. During the completion of her Doctorate in Clinical Psychology Michelle further developed her skills in working with attachment and complex trauma, working in different settings including children's residential homes and a child and adolescent inpatient ward. On completion of the Doctorate in 2011 Michelle gained a Clinical Psychologist post working in a Community Children and Young People's Service, in 2012 she moved into another team as a Specialist Clinical Psychologist and then in 2014 was promoted to Principal Clinical Psychologist. Michelle's NHS posts have all included specialising in working with Looked After and Adopted Children, trauma, and abuse. Michelle also has specialist skills in working with children

and young people with a learning disability, particularly those in or on the edge of care. Michelle also has a lot of experience working with young people who self-harm and present with suicidality.

As a fully qualified clinical psychologist Michelle is trained in a range of psychological approaches, including cognitive behavioural therapy (CBT), as well as systemic and psychodynamic therapy. Michelle has completed additional training in therapeutic approaches including Dyadic Developmental Psychotherapy (attachment focused family therapy, Level 1 and Level 2). Michelle is trained in Dialectical Behaviour Therapy (DBT) for which she is clinical lead in her NHS post; this is an intervention for young people who present with high-risk behaviours such as self-harm. Michelle is also trained in Positive Behaviour Support which is a model of assessment and intervention for children who present with challenging behaviour related to their learning disabilities.

In addition to direct therapeutic work Michelle has a range of experience working indirectly with the systems around children and families. This includes supporting schools, social work colleagues and residential staff with training, consultations, and supervision.
Michelle is an active researcher contributing to research within the Doctor of Clinical Psychology at Newcastle University. As a Clinical Psychologist she is passionate about delivering evidence-based assessment and intervention, staying up to date with research and literature in this field.

JR
Speech and Language Therapist (SLT) and Teacher of Children with Special Needs. BSc Speech and Language Therapy Queen Margaret College Edinburgh (1982), Post Grad Certificate in Education (PGCE) - University of Durham (1983) .

Janet has vast experience of working with children and young people with autism and cerebral palsy as both a qualified teacher and SLT. Experience of both education service and NHS as well as private SLT services. Experience and trainer of Language programs such as Talk Boost, Early Talk Boost (ICAN) Janet has a private practice providing paediatric SLT services to clients of both school and pre-school age, she is registered with the Association of Speech and Language Therapists in Independent Practice.

Janet helps people with a wide range of difficulties including language disorder/delay, Autism Spectrum condition, speech delay/disorder as well as special educational needs. I provide assessment, advice, therapy, and liaison with other professionals. Janet offers training when required and her experience as a teacher as well as a SLT has helped her over the years to develop good collaboration and communication between education and SLT departments.
Janet also works 1-2 days per week for Newcastle University as a Clinical Educator. This role involves working with students on their practical training. This work involves to supervision of second year students in their clinical practice, providing observation and tutorial support, as well as review of all the students clinical planning. I also am involved in the end of year assessment and reports including viva interviews for their end of year assessment.

One day a week Janet is employed by Northumbria NHS trust, providing support to students at Tyne Metropolitan College in Newcastle. As Janet has experience of both SLT and teaching children with Special Needs she can provide specialist Speech and Language support to the College teaching staff, working with students to develop support programs, and also working directly with students to assist with development of their communication skills. This includes both from a therapy point of view as well as practical support such as the introduction of communication aids such as VOCAs.

Janet has 35 years' experience working with children who have communication difficulties and over that time have worked with school age children across the age range and have had a variety of complex needs including autism, dyspraxia, and language delay. I firmly believe in the importance of reflective practice and ensuring that both my team and I had as much opportunity to develop this as possible.

At Montague House Janet will adopt a multi- disciplinary approach by providing direct and indirect consultation and advice.

AD
Occupational Therapist (Dip COT MRCOT)

Allison is Enthusiastic, motivated, friendly and she is a flexible professional with a strong client centred approach. Allison has significant experience working with children, young people and adults with a learning disabilities, Allison has strong interpersonal and communication skills who enjoy working as a team in joint assessments and interventions and collaborative planning of services.

Professional Qualifications include Dip Cot Occupational Therapy Newcastle 1987 Membership of Professional Bodies Health and Care Professions Council - Occupational Therapist Royal College of Occupational Therapists.

Currently Allison is a Band 7 Occupational Therapist in the Children's Occupational Therapy Service Northumbria Healthcare NHS Foundation Trust and has worked there since 2009. Duties and responsibilities include managing a caseload of children and young adults with complex needs, using evidence-based client centred principles to assess, plan, implement and evaluate interventions. Experience in sensory integration techniques. Providing consultation and training to parents and professionals across education, health, and social care Clinical supervision of Occupational Therapy staff. Collaborative working in setting clinical standards and ensuring the service is delivered according to local and national protocol, guidelines, and professional standards of care.

PROTECTION OF CHILDREN

The protection of young people is a top priority at Acedia, through thorough assessment of risk, comprehensive staff training and a collaborative approach to safeguarding, we ensure protective systems are in place to help and protect each child or young person.

MONITORING AND SURVEILLANCE

There are CCTV cameras located to the front and back of the property. Door sensors are on the front door, back door, and internal garage door.

BEHAVIOUR SUPPORT

The behaviour support models that we utilise and embed within our practice are CPI from the Crisis Prevention Institute and Positive Behaviour Support (PBS). These are both primarily proactive and solution focused models, and they empower the team to develop a range of early interventions to support behaviour. Furthermore, they have elements of crisis prevention. Additionally, CPI has physical intervention techniques. Physical intervention will only be used in line with the training and used as a last report when necessary and the measure will be proportionate.

The home work in partnership with local authorities, police, and safeguarding partners, to ensure adherence to child protection and safeguarding procedures. Policies are in place, incidents are promptly recorded and shared as required. Absences, and incidents of missing from home, are taken seriously, and recorded appropriately. Care planning and management of risk include proactive measures and approach towards the development of the child or young person. Appropriate strategies are also in place to ensure the child or young person is effectively safeguarded. Children and young people are treated with respect and unconditional positive regard. Relationships form the basis of the support we provide.

Clinical partners are involved in behaviour support interventions, which are individualised.

DEPRIVATION OF LIBERTY SAFEGUARDS (DOLS)

A Dols order makes it lawful for a child to be deprived of their liberty. The court authorizes the order, and any restrictions are set out in the order. Children of any age, subject to a Dols, requires high levels of care and supervision. This means that a child subject to a Dols will likely be placed in a Children's Home or care.
The order allows these restrictions as a maximum - it does not mean, as a provider, you must apply all of the restrictions at all times (for example, if the need for the restrictions has reduced and this has been agreed by the child's social worker)[1].

At Montague House we would accept a child or a young person who is subject to a Dols order. The service will always collaborate with the placing authority to keep any restriction within the home to a minimum. However, safeguarding a child or young person will always be our priority.

[1] Placing children: deprivation of liberty orders - GOV.UK (www.gov.uk)

LEADERSHIP & MANAGEMENT

Leadership and Management

The leadership and management standard is that the
registered person enables, inspires, and leads a culture in
relation to the children's home that helps children aspire to fulfil their potential; and promotes their welfare. (2) In particular, the standard in paragraph (1) requires the registered person to—

The registered person must ensure that the home is managed in a way that is consistent with the aims and objectives of the statement of purpose and reflects children and young people's care and support needs

REGISTERED PROVIDER AND MANAGER'S CONTACT DETAILS.

Registered Provider
Acedia Care Limited - 1 Maling Court, Union Street, Newcastle upon Tyne, NE2 1BP
Alex Williams – Alex@acediacare.co.uk

Responsible Individual
Kerry Duerden
+44 (0) 191 646 0101
+44 (0) 7507 688 551
kerry@acediacare.co.uk

Home Manager (Registration pending)
Aimee Knox
+44 (0) 191 6460100
0737 622 8967
Aimee.Knox@acediacare.co.uk

Acedia Care Ltd. Company Registration number 15049217

EXPERIENCE AND QUALIFICATIONS OF STAFF

APPENDIX A

(Skills and Experience of the team –)

Manager – Level 5 Diploma working towards
Deputy Manager – Working towards Level 5
Trainee Deputy Manager – Working towards Level 4 / 5
RSW – L Level 3 or Working towards level 4

Physical and Verbal Safety Intervention

MANAGEMENT AND STAFFING STRUCTURE AND SUPPORT.

Home Manager – Full Time – 37.5 Hours Per Week
Deputy Manager – Full time – 37.5 Hours Per Week
Trainee Deputy Manager – Full Time – 37.5 Hours Per Week
Residential Support Worker – 6 Full Time – 38 Hours Per Week
Residential Support Worker – 6 Part Time – Varied Hours Per Week
Residential Support Worker – Sessional – Casual Hours

Acedia Care Ltd. Company Registration number 15049217

PROMOTING APPROPRIATE STAFF ROLE MODELS

At Acedia, the young person is supported by a skilled and competent team. The team access training, support, supervision, and opportunities for ongoing development. The recruitment process is robust, and we take great care in our selection; ensuring new additions to the team hold our values and have a growth mindset, with a desire to continue to develop their skills and experience. We place importance on ensuring the rota is sufficiently covered to meet the needs of the child or young person, including having sufficient staffing levels, who are appropriately skilled and experienced. This ensures that the complex needs can be met, and the staff team are equipped to manage a diverse range of situations. Maintaining a good gender balance is also important for us at Acedia, to provide suitable role modelling for the young person.

To ensure the safety and well-being of the child or young person, sufficient staffing levels are always maintained. This includes a minimum of 2:1 during the day, and 2 staff on a night, including a waking night. The Registered Manager is also office based within the home. An on-call system is also in place, comprising the Manager, Deputy manager and other senior members of the organisation. This allows for immediate out-of-hours support as required.

Staffing levels are kept under review and may increase as required to ensure the needs of the young person are met.

STAFF SUPERVISION

Acedia Care have a Supervision Policy in place which summarises the arrangements for the regular supervision of staff to facilitate their development and to ensure that they are better able to meet their Job Description requirements. This Policy forms an essential foundation to - Staff Performance Appraisals & Training Reviews.

We are committed to ensuring that the model of supervision supports good outcomes:

- To support Open communication regarding Reflective Practice
- To support the quality of care which is delivered to the child so that they can make good progress in all areas of their lives
- To help and protect a child or young person
- To support effective communication links between management and the individual staff member
- To support staff to understand their role and the responsibilities of the job.
- To support staff to perform their duties to a high standard.
- To support staff to reach their personal and professional development objectives

- To support any additional resources that may be required to achieve these outcomes.

Each staff member will have an immediate line manager who will provide on-going guidance and direction relevant to their job performance. Supervision of staff is mandatory in addition to that of staff annual appraisal. The results of supervisory exercises will form part of the overall Staff Appraisal Programme.

Both the employee and the supervisor have a responsibility to ensure that staff supervision is both effective and meaningful. In this respect listed below are the reasonable expectations of both the employee and the supervisor with respect to the Organisation's philosophy and management requirements:

APPENDICES

APPENDIX A

Staff qualifications, experience, and skills.

Kerry Duerden: Responsible Individual and Managing Director

Qualifications

- I am qualified and hold a Bachelor of Science with Honours open degree. The modules were centred around management and leadership in health and social care settings. I had achieved this qualification in 2020.
- I gained CACHE Level 5 Diploma in Leadership for Health and Social Care and Children and Young Peoples Services (England) (QCF) Children and Young Peoples Residential Management Pathway on 29th September 2015. Before then I had gained OCR Level 4 NVQ in Leadership and Management for Care Services (both children and adults) on 22nd August 2011 and in addition a separate OCR Level 4 qualification in Health and Social Care on 23rd March 2010. I completed NVQ Level 3 in 2007.
- I have attended other training acquired during my role as RI, Head of Care and Registered manager which includes, Learning Disabilities Awareness and Inclusion, Understanding Autism, promoting positive behaviour management, Designated Safeguarding Advanced Lead training, Trafficking, Exploitation and Modern Slavery, Risk Assessment in Safeguarding Keep Them Safe.

Skills

- Situational leadership skills
- Advanced safeguarding
- Building and maintaining positive relationships
- Quality assurance and monitoring
- Effective open communication
- Coaching and Mentoring
- Strategic thinking and planning

Experience

- I have worked in diverse social care settings since 1999. I have gained 25 years' experience supporting vulnerable adults, children, and young people across residential settings.
- I have experience of working at Director level and Responsible Individual role.
- I also have experience of leading a team previously as a registered manager within a local authority children's home supporting children and young people with complex needs, trauma, and emotional needs. The home was rated by Ofsted as outstanding.
- I was a registered manager of a short breaks children's home leading a team to support children and young people with learning disabilities and complex needs.

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Aimee Knox : Home Manager

Qualifications
•NVQ level 3 in health and social care
•Advanced level apprenticeship in Adult Social Care in the apprenticeship sector for occupations in social care and the care of children and young people
•BTEC level 2 in employment responsibilities and rights in health and social care and children and young people's settings
•Level 4 managers toolkit bootcamp
•Medication level 2
•Safeguarding children level 2
•Safeguarding adults level 2
•PACE introduction

Skills
•Resilient
•Think outside the box
•Service development
•Communication
•Staff mentoring and developing teams
•Staff induction
•Maintaining staff morale
•Competency assessor for medication
•Adaptable to support children and young people with a variety of needs

Experience
•Over 20 years' experience of supporting individuals with learning disabilities, autism and complex needs. Including over 5 years' experience of working in children's residential homes. During my time at Percy Hedley, I supported 12-14 children who lived at the home who had a diagnosis of Autism, complex needs, learning disabilities, BSL needs and behaviours that challenge. I worked my way up from a residential childcare officer to a deputy manager. In my deputy manager role, I managed a team of 50+ residential childcare officers and 3 seniors, providing support and guidance and enabling them to support the children to meet their goals, and have their needs and wishes met.