

Statement of Purpose

QUALITY AND PURPOSE OF CARE

Registration number: 2711793

Updated: 13/12/23



Pike View Care

Caring For Young People

This Statement of Purpose is freely available to:

- Any person who works at the Children's home.
- Any child accommodated in the Children's home.
- The parent of any child who is accommodated in the Children's home.
- The placing authority of any child accommodated at the Children's home.
- Any child who is being considered for accommodation in the home.
- Any other organization or person involved in placing a child.

Index:

1. Aims and objectives.
2. Philosophy and Values.
3. About the home.
4. Organisational structure and operational details.
5. Admissions to the home.
6. Admission criteria.
7. Reviews/Placement Plans
8. Education
9. Hobbies, Recreational, Sporting and Cultural Activities.
10. Individual Health of children.
11. Drugs or alcohol use or substance abuse.
12. Medication.
13. Contact with family or significant others.
14. Complaints and Representations.
15. Behavioural support.
16. Child Protection and Safeguarding
17. Children who are missing from care or absent without permission.
18. Bullying.
19. Fire safety.
20. Health and safety.
21. Staffing at the home.
22. Staff supervision, training, and staff development.
23. Overnight staffing arrangements.
24. Independent supervision for managers.
25. Contact us.

1. Aims and objectives.

The primary aim of the home is to provide support and individual care packages to children who are struggling in their lives. The aim is to enable looked-after Children to make a planned return to their families, foster care placements or long-term residential.

We complete an initial assessment with the social worker to ensure that the placement is in the child's best interests. The registered manager at the home (William Ingham) and his staff team will work in close cooperation with children, parents/carers, social workers and other professionals to achieve the very best outcomes.

The manager will assess the child's needs and where appropriate, plan for the move, unless in an emergency. Our staff will support the child during the transition by accompanying them to visits and building relationships, we also offer an outreach family support package once they are in the placement to help maintain relationships with family.

If the child is approaching the age of sixteen and it is deemed to be in the best interests of the child to reside in semi-independent living. Our support package includes budgeting their allowances, cooking, taking responsibility for making and attending appointments, managing routines, cleaning their rooms, completing their laundry and any other tasks identified. Children can remain at Pike View Care until their 18th birthday. We will ensure that a clear plan is in place for the transition to semi-independence as soon as an identified placement is available.

Objectives:

- To work in partnership with looked after Children, their parents/carers, social workers, and other relevant professionals to meet agreed aims.
- To assess and meet each child's physical, behavioural, developmental, social, and emotional needs.
- To build trust and positive relationships with the children to ensure they feel valued and cared for whilst providing clear and realistic boundaries.
- To provide, in collaboration with the child, parents and other professionals, a detailed care plan to meet assessed needs. The care plan must include specific roles and responsibilities for those contributing to the plan. It must also state agreed objectives and timescales for work to be completed and services provided.
- To provide a safe and nurturing environment for children that promotes individual well-being and protects them from harm.
- To provide high standards of care appropriate to the individual needs of children as identified in their referral notes.
- To help support the children to explore some family dynamics and help them understand their feelings and difficulties and to empower children to take control and feel more confident in taking responsibility for their own lives and behaviour.
- To ensure each child can participate in fun outdoor activities such as camping, mountain biking, bushcraft, canoeing etc.

2. Philosophy and Values

We believe that all children have a right to be protected from abuse, neglect, and exploitation. We recognise that many children we work with are vulnerable.

We believe in working in partnership with parents and carers as parents have an essential role to play in any plans made for a child and we will include parents in all aspects of decision-making regarding their child, where applicable.

We believe in taking a holistic approach to the care of children and we aim to work in close partnership with other professionals and organisations including health, education and the voluntary or private sector, recognising the value of alternative perspectives. The service will aim to work closely with other relevant professionals and aim to include them where possible in looked-after reviews and planning meetings.

We believe children should have their views valued and respected particularly as regards key decisions in their future. Staff at the home will strive to ensure the child's views are heard and, where necessary, will act as advocates for a child, or offer advice on independent advocates outside of the home. We take children's views seriously and we include them in decision-making around all aspects of their daily lives. The structure of support for a child at the children's home centres on a 'Keyworker' system.

3. About the home

The home provides a service for two children of any gender. The home is a three-bedroom property. Two of the bedrooms are for the young people and the other, a staff bedroom. The home has an open-planned lounge which leads to the dining and kitchen area. The Manager at the home takes a positive role in the local community and he has good relationships with neighbours, this includes attending neighbourhood events including community outreach programs.

The staff office is situated in the back garden. This provides the young people placed in the home to have private discussions with their social workers and other outside professionals, should this be their preference.

Pike view care is situated on a residential street and is not distinctive from other surrounding properties. The property is located next to a park and large fields where children can play and exercise. The rear garden has a spacious grassed area and decking for BBQs, there is seating furniture for children to relax when the weather is pleasant. The front of the property has private parking for two cars. The home is staffed 24 hours a day by a dedicated staff team.

The property has a spacious open-planned lounge which leads onto the dining and kitchen area. Bedrooms are decorated to a high standard and each room contains furniture for storage and a TV connected to the internet, monitored by staff. children are encouraged to personalise their rooms and participate in choosing appropriate small bedroom items for their rooms such as posters, ornaments, lamps and pictures of family or significant others. The choice of bedroom for children is based according to need and availability.

The home has CCTV Security covering the external grounds of the home, this is to ensure the safety of staff and children and to assist in the detection of crime. The system is based in the main office and is monitored daily.



4. Organisational Structure and operational details

Pike View Care Ltd is a registered company that owns and operates a children's home in the Greater Manchester Area. Registration Number 2711793. Contact Address: 9 Wyndham Avenue, Bolton, BL3 4LQ. The home operates on a 24-hour rota with a minimum of one staff member working duty during the night. There are two staff members at the children's home during the day, but this may be reduced or increased according to occupancy levels and the needs of the children. The manager also works day shifts and sometimes stays overnight. Arrangements are made during evenings, weekends, and holidays for either the Manager or a senior to be on shift or call.

HMCI Ofsted is the regulating body that oversees children's homes in England. The purpose of Ofsted's inspection of children's homes is to assess the quality of care provided to the Children in placement. The inspections focus on the outcomes that are being achieved and if the Children's home meets the relevant regulations, guidance and framework. Ofsted will also assess whether the children's home is running by the home's statement of purpose.

Inspectors will report their findings in line with evidence from visual observation, written documentation and discussion with children, staff and management. Feedback from parents and other professionals will also be sought. Inspectors will also make requirements where these regulations are not being met but also recommendations for improvement. Ofsted inspection reports for children's homes can be found on the Ofsted.gov.uk website using the home's unique reference number.

5. Admission to the home

All Admissions to the home must go through referrals@pikeviewcare.co.uk. On receipt of any request for accommodation for either emergency or planned admissions, the manager will liaise with the responsible individual, who offers advice on the suitability of the proposed admission and complete a new referral risk assessment with reference to the home's admission criteria. Any emergency admissions will last for not more than three days before an assessment is undertaken between management and the social worker to determine whether the placement is appropriate to become long-term. For planned admissions only, if there is an agreement between the home manager and the social worker. On admission, we allocate a key worker who will arrange visits to the home by their family, carers, or friends.

- The appropriate Looked After Child (LAC) forms will be completed and signed including the Care Plan and Placement Plan.
- The meeting will draw up a Placement Plan for the child, which will define roles, responsibilities, the expected outcome, and the time scale of the placement. This will include a detailed home day-to-day care plan.

- The first Looked After Review date will be set.
- A time scale of visits to the child by their allocated social worker will be drawn up and agreed upon.
- Arrangements for family contact will be agreed upon.
- Any outstanding issues and details regarding the health, and education of the child will be addressed including appointments, medication and any therapeutic input.
- Arrangements for supporting regular activities/clubs will be agreed upon.
- Expectations of the child's behaviour whilst living at Pike view care will be outlined, including school attendance, boundaries within the home, staff responses to unacceptable behaviour and the registered provider's response to dangerous or disruptive behaviour that can cause risk to the child and others.
- Any individual and cultural needs will be addressed, including diet, religious observance, and other relevant supports for the child.

Emergency Placement Procedure

In the event of a referral for an Emergency Placement, the person receiving/administering the referral will do all that is reasonable to get as much information from the referring agency.

However, any decision to admit a child in these circumstances must be based on an assessment of the available information that the child's needs are likely to be met by the home (if out of hours the on-call manager will be consulted before accepting the referral). For emergency admissions, staff will follow the same process as planned admissions. However, given the time constraints, the risk assessments will be carried out from information provided over the phone or e-mail. Referral forms need to be completed and received before the child is admitted despite the time pressures with emergency placements.

As a minimum, the following information will be required at the time of the placement:

- The contact arrangements that may be permitted between the child and their parents, siblings, relatives, and friends – no contact may be allowed without the approval of the social worker, in writing, or set out in the child's Placement Plan.
- A copy of the child's Care Plan and current Health Plan or, if they are not available, details of any healthcare or medical needs/requirements that the home should be aware of e.g. home remedies or medication that the child may require.

The home may also offer no more than one placement at any time to Children charged and being held by the Police overnight until the next available court. This is under the provisions in the Police and Criminal Evidence Act 1983 to transfer from Police Custody to Local Authority accommodation. It is subject to a risk assessment of the child and must have the agreement of the House Manager. Note: This is not in any way to be considered a secure placement.

6. Admission Criteria

The home is not able to meet the needs of children with profound physical disabilities, as the building is not suitably adapted. The home is also not able to meet the needs of Children with profound learning disabilities. The home aims to meet the needs of Children with a range of challenging behaviours and other safeguarding concerns, which make it difficult for them to live with their families. Our priority is the children we serve; therefore, we must protect but we also

have a responsibility to the local community. For these reasons, we may not be able to meet the needs of children with the following behaviours or conditions.

- Children with diagnosed psychiatric problems or obvious assessed mental health needs. For example, children who seriously self-harm.
- Children who have a recognised addiction to drugs or alcohol. (As opposed to substance abuse).
- Children who have a history of sexual offences and/or present with persistent sexually abusive behaviour.
- Young offenders with a recent history of persistent serious offences against property such as burglary, and car crime.
- Children with a history of violent offences and or persistent violent behaviours, for example, a record of serious assaults on other children and or staff.
- Children with a recorded history of arson or persistent dangerous fire lighting.
- Children on Remand

7. Reviews/Placement Plans

The home considers Looked After Reviews of children as an essential requirement of providing an effective service for children and families. Children's needs, development and progress in all areas of their life are formally reviewed and recorded regularly in line with good parenting' guidelines. CLA reviews will take place outside normal school hours. The child's key worker and the registered manager will attend the review.

The home Manager will ensure that the allocated key worker prepares a fair and accurate report of the child's progress in designated areas for the child's Looked After Review. The child, before the review meeting, will see the completed report and any comments by the child will be added to the report. The Registered Manager will also check and sign the review report. The report will include any difficulties for the child in the placement and will specifically highlight the child's achievements and any areas of progress.

Staff are provided with guidance on preparing for a looked-after child's review in the home's policy on reviews. The home's review procedures also include guidance for staff in assisting the child to contribute their views fully to the process and the use of an advocate for the child where appropriate. This also includes guidance for staff on ensuring the child is allowed to contribute fully to the review process both in the writing of reports and in the review meeting itself. Staff must ensure the child is offered the opportunity to discuss the outcome of the review and any issues arising.

The Manager also ensures that staff implement the agreed outcome of reviews as necessary in the day-to-day care of the child. This includes recording the outcomes of the statutory review and the amendment of the day-to-day care of the child as necessary. Individuals responsible in the home for pursuing actions arising from review decisions must also be identified.

The Registered Manager will request an emergency statutory review for a child where no review has been planned. Also, where there has been a major change in the plan for a looked-after child/child, a review must be called so that all parties can agree with a change to the care plan. The child/child will be given copies of reports and minutes of review meetings and be assisted by the key worker to understand them and store them appropriately. Details on the review process are provided in the young person's guide.

8. Education

The home is committed to ensuring that every child receives full-time education that is appropriate to his or her needs. Staff, in close liaison with other responsible agencies, will actively pursue the child's educational needs, which are identified in their care plan. Staff at Pike view care will support children to attend a local school. The home will actively engage with schools and representatives from the virtual college to maintain a child's full-time school placement. Where a child is excluded or has no school place, staff will work closely with education professionals to ensure full-time schooling is provided as soon as possible and within the minimum statutory timescale. Where a child is excluded or has no full-time school placement, staff will supervise education work set by schools. When a child is only receiving part-time education, staff will work closely with the school to increase schooling to full-time hours if possible or seek extra home tuition during unfilled school hours. Children receive weekly rewards from the home for regular school attendance. They can also receive other individual rewards for sustained improvements in school attendance and performance commensurate with their care plan. Staff will encourage children to complete homework on their return from school, liaising closely with schools around homework diaries and working on individual education programmes. Staff will support children's school attendance by assisting with travel to and from the school where agreed in the care plan. The home, in collaboration with the child's social worker, will also provide school uniforms, education equipment and supplies for children, as well as funding for school meals, school trips and excursions. Staff will attend PEPs, EHCP reviews (if applicable), parent's evenings and, other school meetings and support Children attending after-school clubs and appropriate extracurricular activities.

9. Hobbies, Recreational, Sporting and Cultural Activities

Staff at the home will prepare activities together with children such as camping trips, country walks mountain biking, dog walking, bowling, cinema, swimming, etc. Children have access to the Internet connection that is monitored by the staff team to ensure the residents are safe online. Children are encouraged to invite friends back to the home outside the normal school day in line with the home's visitor policy. This provides guidelines for visitors including expectations of behaviour and allows access to the downstairs area of the house. These visits are closely monitored by staff on duty. Children are encouraged to access recreational and leisure activities in the local community including activity programmes run by local youth services. The registered manager will ensure that all staff are made aware of any child's religious needs, and respect these accordingly in line with the child's care plan. Where a child uses a specific language as part of their cultural heritage this will be acknowledged by staff and respected, and an interpreter will be employed to use in any formal meetings if necessary.

10 Individual Health of Children

Shortly after admission, children are registered with a local GP dentist and optician. Pike View Care has a therapeutic practitioner attached to the service. (Stacey Withington) who is involved in the matching process and will meet with Children individually. The practitioner holds the following qualifications:

MSc Positive Psychology and Counselling

BSc Criminological and Forensics Psychology (1st class with Honors)

Mindfulness and Life Coaching (level3)

Childcare and education level 3

CPD; Cognitive Behaviour Therapy (CBT)

CPD; Suicidal Assessment and Prevention

Restorative Justice Facilitator trained.

International Author (published articles in the UK about my journey around Florida-USA and Positive Psychology for Trauma)

Registered with BACP (British Association for Counsellors and Psychotherapists)

Any identified health needs will be incorporated into the child's Care Plans and Placement Plans. In combination with the nurse for looked-after children, the designated keyworker will be responsible for ensuring the child receives a full medical assessment as soon as possible after admission. This will include the completion of a health assessment summary profiling the child's health needs and identifying an action plan to meet those health needs. The looked-after children's nurse can be called on to attend the home to discuss the needs of individual children and any health issues they have.

11. Drugs or alcohol use or substance abuse

Staff offer guidance around giving up smoking, and drugs. Smoking is not permitted inside the home and there is support available to help children and discouraged them from smoking. It has been agreed that children that do smoke can smoke cigarettes in a designated area, this is to avoid congregating on the street and disturbing our neighbours. Staff members are aware of the effects of drug and alcohol use and how to recognise symptoms. The staff know how to refer children to the appropriate agencies, which may assist them to deal with drug or alcohol use or other substance misuse.

12. Medication

The Registered Manager takes overall responsibility for the safe and accurate administering of medication and ensuring first aid kits are replenished, in line with regulation 23. Staff are provided with guidelines and procedures in the home's medication policy which include supervision of staff to ensure they are competent to administer medication and training for staff on the administering of medication and related issues including consultation with the nurse for looked-after children. There are procedures when administering medication in line with statutory requirements that include guidelines on how and where to administer drugs as well as recording medication refused by children and safe handling and storage of any prescribed medication. The home uses a locked cabinet for storing medication. The home's Medication procedures are reviewed annually, and medication stock checks take place daily. All staff receive first aid at work training as part of their induction programme which is renewed every 3 years to ensure a qualified first aider is available on every shift. On admission, the child's parent/carer, or social worker signs the home medication agreement. This list can be supplemented by other specific home remedies to meet the individual needs of the child, but any additions must be specified on the agreement and signed by the parent/carer or social worker.

13. Contact with family or significant others

Family contact is viewed as an essential part of the care plan for any child. Whenever possible family contact will be actively encouraged, and when necessary, facilitated by staff at the home. Parents, siblings, and significant others will be welcome at the home if requested by the child, in

line with the responsible authority's expectations. Staff will actively support a child's visit to family or relatives if agreed in their care plan. Where contact is not possible, due to practical reasons such as where a parent/carer lives abroad or is in hospital, staff will actively promote contact by letter, telephone, or any other reasonable means such as virtual meetings. Children may be allowed in certain circumstances to visit and stay with friends, but permission would be needed from parents and social workers to ensure this would be in the child's best interests and that the child remains safe. This should be risk assessed and should always be addressed in the child's care plan.

14. Complaints and Representations

The home has a robust complaints procedure in place. They help us to improve practice and they are a useful method of obtaining feedback about the service. The registered manager ensures that all staff are aware of the complaints policy and their responsibility to act on complaints and provide children, parents and others with further information and details if required. On admission, children and their parents or carers are made aware of the complaint's procedure. They are provided with a welcome guide detailing Pike View Care's complaints procedure, how to register a complaint and where to get help to register a complaint.

15. Behavioural support

We believe control and discipline should be maintained based on good personal relationships between staff and children within a consistent and safe environment. Staff are provided with guidance in this area in the home's policy 'methods of care control'. Individual children will be risk assessed regarding their behaviour and forms of control and strategies highlighted in individual risk assessments, behaviour management plans and care plans.

It is recognised that children may demonstrate behaviours that are inappropriate, unwanted and sometimes unsafe. On occasions, staff will have to work with children exhibiting unacceptable behaviour. In this instance, staff will endeavour to assist and support the child to refrain from unacceptable behaviour and seek an alternative, more positive forum for their feelings of anger and/ or frustration. Where possible staff will attempt to diffuse a situation and use de-escalation techniques to calm a child and prevent a serious incident. These could include offering to take them out on a one-to-one basis to talk through the situation or negotiate an alternative activity within the home such as cooking a meal, helping with gardening tasks or using arts and crafts etc.

Where conflict has arisen between individual children, staff will attempt to provide opportunities for children to resolve their differences acceptably. This may be by addressing the issue later when the atmosphere is calmer and encouraging children to reflect on the causes of their behaviour, how they may have reacted differently and how they will deal with such conflicts in the future.

Where conflict has arisen between the child and a member of staff, we provide an opportunity for the child and staff member to reconcile differences by use of a third party, if necessary. Where these approaches are unsuccessful, and the child is still presenting unacceptable behaviour then the imposition of a sanction may be an appropriate response. A consequence may also be imposed if the child repeatedly fails to adhere to the house rules, which are communicated at the outset of the placement and agreed upon in the child's care plan. This is only enforced where it is made clear to the child that a sanction will be the consequence of this failure to adhere to house rules. The home has a 'behaviour management policy' for staff, which provides guidelines on the

appropriate use of consequences in accordance with the Children Act 1989 which includes the following measures which **will not** be used:

- Any form of corporal punishment
- Any deprivation of food or drink
- Any restrictions on visits or communication with Parents or any person with parental responsibility or with any professional assigned to the child.
- Any requirement that the child wear distinctive or inappropriate clothing
- The use or withholding of medication, medical or dental treatment.
- The intentional deprivation of sleep
- The imposition of fines (except by way of reparation)
- Any intimate physical examination of the child or child.

Restraint and deprivation of liberty

All employees receive 'Prevention, Protection, and Restoration' training and may have to apply physical restraint. Restraint will only be permitted to prevent injury to any person (including the child), to prevent serious damage to the property of any person (including the child), or to ensure safety.

training and regular re-certification of skills in the model of Crisis prevention intervention and de-escalation skills: physical restraint will always be avoided as we believe this action may be traumatic, will encourage relationship breakdown, and goes against our aims and objectives.

It may also be necessary to lock external and internal doors to de-escalate a situation or to prevent immediate harm. Any decision to do so must be agreed upon by the manager and for a minimum period so as not to restrict the liberty of the child involved or the other resident.

All Children are risk assessed as part of the referral. The risk assessment offers guidance on how to best manage challenging behaviours. In most instances, the situation can be diffused by staff recognising the warning signs, diversion and occasionally using other techniques i.e., strategies identified that have previously been effective. All incidents where break away interventions have been used are recorded and signed by a manager, and information is shared with the relevant people/agencies.

16. Child Protection and Safeguarding

Pike View Care staff follow the Child Protection policy as agreed by the Local Safeguarding Children's Board (LSCB). There are child protection procedures and training provided to staff that helps them to protect children from abuse. These include detailed guidance on 'methods of care and control', 'permissible sanctions,' 'break away' 'regulating visitors' 'missing from care, the whistleblowing policy, safeguarding children, the bullying policy and 'administering medication. Other safeguards for children are also identified during the compatibility assessment.

There is a copy of the LSCB procedures and guidance for staff on protecting children living in children's homes. The Manager of the home ensures that through supervision all staff are aware of and understand these guidelines and procedures. The House Manager regularly liaises with the LADO and safeguarding advisors to seek advice about local procedures and practices and how these relate to keeping children safe. Safeguarding training for staff is part of an induction programme and includes safeguards to prevent abuse, dealing with disclosures and suspicions of abuse and the home's child protection procedures. Staff attend regular refresher training in child

protection and a variety of other safeguarding training relating to exploitation, gang-related abuse, neglect, missing from home, radicalisation, substance misuse and county lines etc.

17. Children who are missing from care or absent without permission

Pike View Care staff follow the *Runaway and Missing From Home and Care* (RMFHC) protocols that are agreed upon with local police and other partners. Where appropriate, they have also agreed on protocols with neighbouring authorities, where applicable. The protocols are reviewed regularly with all agencies and scrutinised by the Local Safeguarding Children's Board (LSCB). Staff actively search known areas and work with families to help return the child.

Pike View Care has a multiagency Missing from Care policy with guidance for staff and children. This includes procedures involved in reporting children missing, who should be informed, risk assessments of children, how to respond to a child's return and the use of an independent person if requested to interview the child on their return. Staff usually undertake a return discussion on their return or as soon as possible after their return, a police officer also undertakes a police prevention interview with the child usually within 6 hours of return. This includes procedures involved in reporting children missing, who should be informed, risk assessments of children, how to respond to a child's return and the use of an independent person if requested to interview the child on their return. Staff usually undertake a return discussion on their return or as soon as possible after their return, a police officer also undertakes a police prevention interview with the child usually within 6 hours of return. Children are required to inform a member of staff when they wish to leave the home.

No planned activity should require a return time later than 11 pm unless otherwise agreed in the child's care plan or agreed by staff on duty. If a child has not returned to the home at the agreed time (depending on age and individual care plan) and staff are not aware of any planned agreed overnight stay with family or friends, the staff on duty will contact the child's family, friends and known contacts to try and establish their whereabouts. If this is unsuccessful, they will be reported missing to the Police, Emergency Duty Team and their parents (if applicable).

Staff consider the age, vulnerability and information provided in risk assessments that have been undertaken by staff. For example, a child may be reported missing if they fail to arrive at school. If a child is missing from the home for more than 24 hours with no contact the Service Manager will be informed as a matter of urgency and a strategy meeting may be convened, a Regulation 40 notification will be submitted. A record is kept in the home of all unauthorised absences/missing periods and patterns will be monitored by the Registered Manager using a trend analysis monitoring tool.

18. Bullying

Bullying is not tolerated at Pike View Care and staff work proactively to counter bullying. Any issues or concerns regarding bullying will be addressed in the child's care plan and the home's stance on bullying is made clear for children in the welcome guide. The home has a bullying policy, which defines different types of bullying, the symptoms, and effects of bullying and how staff should work with both the victim and the perpetrator. The staff at the home will actively support a child, parents or carers or other professionals to deal with bullying issues outside the home, in school or in the wider community. The home has CCTV Security covering the external

grounds of the home, this is to ensure the safety of staff and children and to assist in the detection of crime. The system is based in the main office and is monitored daily.

19. Fire Safety

The home has had a robust fire risk assessment completed by Lancashire Fire Protect which is updated annually and re-assessed every 4 years. The management team takes responsibility for the effective operation of the home's fire policy and procedures. All children are made aware of evacuation procedures and the fire policy is explained to them before or on admission. This information is also made available in the Children's Guide. The home's fire policy includes:

- The internal fire doors and fire alarm system is checked/tested weekly, and any faults are reported immediately and recorded in the home's fire risk assessment.
- All firefighting equipment is checked monthly by staff and the information is recorded. Lancashire Fire Protect also checks all equipment annually.
- Fire evacuation drills are undertaken at least twice per year, at least one of these at nighttime. These are signed off by a manager and accurately recorded in the home's fire book. Any concerns are recorded, and action is taken. There will also be a fire drill when a new staff member is employed or if there is a new referral to the home.
- All permanent staff are informed as part of the induction of relevant fire safety procedures and receive training on firefighting/use of extinguishers.
- An internal fire risk assessment is reviewed weekly, and any requirements are actioned immediately.
- Information about the home's fire warden

20. Health and Safety

Pike view care has a Health and Safety allocated person who undertakes rigorous Health and safety audits every month and they are reviewed annually by a manager at the home. The home's manager also conducts working visual environment risk assessments daily to identify any property damage, repairs needed or areas of concern within the home. The home's annual electric safety check was completed on 30.06.2022. All portable electrical equipment is tested annually to ensure it meets regulated standards. The use of any toxic cleaning materials is risk assessed, as is any other potentially harmful substance or equipment. There are several contractors are employed to undertake regular checks of gas, electric and hygiene equipment etc.

21. Staffing at the home

The team is well-balanced in terms of age and gender. All staff are expected to complete a Level 3 Diploma in CYP or equivalent. Some staff members are currently undertaking this qualification.

The Registered Manager is William Ingham.

William has completed a level 5 Diploma in health and social care for children's services (Leadership in Management). Billy also holds an NVQ level 3 social care award in health and social care (Children and young people). The manager has 16 years of experience working with children. He enjoyed his role as a residential support worker and a deputy manager before becoming the registered manager for over 10 years. During his time in this position, William has supported children with various complex needs. This included offering support around

Safeguarding, Health/Medical, Emotional, behavioural and identity struggles. Billy obtained back-to-back Good or Outstanding ratings from Ofsted.

The Responsible Individual is Gary Holt.

Gary holds an NVQ level 4 leadership in management for children's care services and has completed an NVQ level 4 health and social care (Children and young people). During the completion of his qualifications, Gary was awarded an outstanding dedication certificate for his commitment to children. Gary has experience in a variety of different social care roles. He worked as a children's home registered manager for over 11 years and was the company safeguarding officer and the area support for other managers. He was successful in obtaining either Good or Outstanding ratings when inspected by Ofsted. Gary was also the responsible individual for another home belonging to the service and has worked as a Regulation 44 inspector, visiting children's homes throughout the UK to conduct quality of care inspections.

Lauren Whyte (director): Education support - Level 4 Higher Level TA qualification. Lauren works at a local primary school and has lots of experience in Safeguarding Children in education. Although Lauren is a director of Pike view care, she also works part-time with children at the Children's home supporting them with their learning.

Jade Edwards: Support worker – holds a level 3 diploma in Health and Social Care. Jade is a valued member of the team and has developed strong relationships with the young people placed at the home.

Lisa Davies support worker- holds a level 3 diploma in Health and Social Care. Lisa has a bubbly character and has built up strong relationships with the young people that are placed with the home. Lisa is also a peer navigator for the local Daisy Dell project which is a local community inclusion group for the less advantaged. Lisa has completed a qualification in Developing Interaction Skills for Information Advice and Guidance, she once won a community star award for the work she does with children.

Dawn Halliwell: Support worker—holds a level 3 Diploma in Health and Social Care. Dawn has built up positive relationships with the young people that are placed.

Ebrima Joof: support worker. Ebrima has experience working with Children with various needs prior to commencing employment at Pike View Care Ltd. Ebrima is a calm and caring person who likes to work as part of a team. Ebrima is currently participating in a three-month probationary period and will be enrolled on a level 3 Social Care diploma. Ebrima has completed all mandatory training as part of his induction period.

Blaine Torkington: part-time support worker. Blaine also works at Bolton School supporting a child who has complex needs. Blaine has youth on his side and children take to him as they usually share a lot in common such as music and sports. He is currently working towards a level 3 social care diploma.

Liam Stewart: support worker—Liam is new to the team and does not have any previous experience working with children. Liam has experience working as a manager in a food production outlet, which involved managing large staff teams. Liam has a calming and nurturing personality which will be beneficial working with children. Liam is currently completing a three-month probation program and if successful will be enrolled to complete a level 3 diploma in Health and Social care.

Michelle Ingham: Support worker (bank) healthcare support worker. Michelle is currently working part-time to support young people's health needs. Michelle also works for the NHS and holds a degree in health and social care for vulnerable adults. She has a passion for working within the care system and is keen to transfer the knowledge and skills she has acquired and utilise these working with children.

Stacey Withington is the home's Therapist support. She is qualified in the following: Mindfulness and Life Coaching (level 3) Childcare and education level 3, CPD; Cognitive Behaviour Therapy (CBT), CPD; Suicidal Assessment and Prevention, and is a Restorative Justice Facilitator. Stacey will be involved in the matching process and will work with the children individually.

22. Staff Supervision, training, and development.

All residential support workers receive regular supervision lasting at least one hour every 6-8 weeks. New staff, during the probationary period, receive supervision every two weeks during a three-month probation program. Training and development needs are addressed as part of the supervision process and supervision notes are recorded and kept on file in line with Pike View Care policies and procedures. All staff have an individual training profile and are expected to complete mandatory and relevant training courses. All residential staff have completed or will be expected to undertake a minimal level 3 diploma in Health and Social Care (Children and young people). All staff members have received robust face-to-face Safeguarding training before having contact with a child.

23. Overnight staffing arrangements.

The home has two staff members on-site overnight. If the home is used as a solo placement (bed blocking) one room will be converted to a staff sleep to accommodate the home having two staff members overnight (one waking night and one sleep-in). Should the home have two residents, there will be two staff members available throughout the night to complete waking night cover.

24. Independent supervision for managers

The home's registered manager and the responsible individual are supervised by an external person once a month. Safeguarding matters such as allegations and complaints are independently scrutinised by the independent person to ensure that the correct procedures have been followed.

Independent supervisor details:

Nic Poole – Social work degree.

Holistic approach services ltd

07938 182784

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Regulation 44 external monitoring visitor:

Susannah Gilchrist

07751 763819

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25. Contact us

Registered Manager: William Ingham 07912089563 Hello@pikeviewcare.co.uk

Responsible individual: Gary Holt 07769395752 Garyholt@pikeviewcare.co.uk



Website: www.pikeviewcareltd.co.uk



