**Thurrock Council Service Specification**

**Regulated Residential Care for Children and Young People aged 16 and 17**

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### 1. INTRODUCTION AND BACKGROUND

1.1 Thurrock Council is seeking Residential Care Providers for the care and support of our Looked after Children.

1.2 **This specification is aimed specifically at Ofsted regulated provision for 16 and 17 year olds, an area which historically has been difficult to make placements to where care is required as opposed to support in a supported accommodation placement.**

1.3 Since 2016 the government has started to utilise the recommendations of Sir Martin Narey’s review of residential child care. Government strategies “Putting Children First” and “Keep on Caring” put great emphasis on looked after children experiencing stability, feeling safe and secure, and also supporting Children and Young People from care to independence. The Council will expect successful providers to fully participate in the innovation programme surrounding “Staying close”. Successful providers and the Council will work together to ensure that any significant strategies / legislative changes are included in the development of services going forward.

1.4 During the Council’s engagement and consultation with young people who have experienced being “looked after”, they used the following key words to describe the features of a good service:

|  |  |  |
| --- | --- | --- |
| Trust | Listening | Structured |
| Communication  | Helping | Transparency |
| Supporting | Understanding | Knowledge  |

#####  Numbers of Looked After Children

1.5 Thurrock is committed to robust safeguarding responses where it is necessary to ensure the safety and best interests of the child. As of September 2019 there were 302 looked after children

1.6 The types of placement that our looked after children are placed in are as follows:

* 25 are in residential care
* 130 are in independent foster care
* 110 are in local authority foster care
* 31 are in supported accommodation

### 2. THURROCK COUNCIL PRIORITIES

2.1 Thurrock Council’s Vision and Priorities are set out below:

**Our vision**

**An ambitious and collaborative community which is proud of its heritage and excited by its diverse opportunities and future.**

**Our priorities**

**People - a borough where people of all ages are proud to work and play, live and stay.**

This means:

* high quality, consistent and accessible public services which are right first time
* build on our partnerships with statutory, community, voluntary and faith groups to work together to improve health and wellbeing
* communities are empowered to make choices and be safer and stronger together

**Place - a heritage-rich borough which is ambitious for its future.**

This means:

* roads, houses and public spaces that connect people and places
* clean environments that everyone has reason to take pride in
* fewer public buildings with better services

**Prosperity - a borough which enables everyone to achieve their aspirations.**

This means:

* attractive opportunities for businesses and investors to enhance the local economy
* vocational and academic education, skills and job opportunities for all
* commercial, entrepreneurial and connected public services

2.2 Thurrock Council in addition has a number of related strategies and policies with which the Service Provider shall comply. These are set out in detail in Appendix 4: Applicable Policies and Strategies and include:

* Violence against Women and Girls
* Child Sexual Exploitation
* Prevent
* Hate Crime

### 3. OUTCOMES

3.1 The Service aims are set out as follows:

* To safeguard children and Children and Young People from harm and exploitation
* Where appropriate to enable Children and Young People to return to their families / carers
* To provide a stable, safe, caring and secure accommodation for Children and Young People
* To enable Children and Young People to develop confidence and resilience and have positive wellbeing through structured support
* Ensure that Children and Young People are treated as individuals and are actively involved in decisions that are made about them
* Be attentive to each chilkd/young person’s individual needs
* To ensure that Children and Young People develop and acquire skills that will prepare them for independent living, adulthood and employment through structured support in many aspects of their lives
* Work in partnership with the Council and other agencies to safeguard the Child or Young Person and ensure that they live fulfilling lives

3.2 Children and Young People in residential care will have experienced multiple rejections and exclusions in their lives. Many will have experienced significant abuse and harm at various levels and as a result will display their emotional distress that will test the boundaries of others. As such providers must have the knowledge, skills and experience to adapt to the challenges of delivering a service intent on achieving the best outcomes for Children and Young People.

3.3 This service specification for their care and/or education sets out the service to be provided within the outcomes framework. This specification is generic and written to cover the range of residential care and/or education settings whatever their conditions of registration are.

3.4 The outcomes and service requirements specified will therefore be applied in the context of and as relevant to the specific conditions of registration of each residential placement, and that residential placement’s statement of purpose, and any special conditions agreed between the parties.

### 4. SAFEGUARDING

#### 4.1 General principles

4.1.1 In addition to the requirements set out in this Section 4, the specific clauses with the standard terms and conditions of the contract with regard to safeguarding will apply.

4.1.2 The Service Provider will participate in local safeguarding children’s boards where required and understand their responsibilities and the responsibility of others in line with the Children Act 1989 and 2004. Adherence to these procedures may at times limit the right to confidentiality.

4.1.3 The Service Provider will adhere to the Southend Essex and Thurrock Safeguarding Children Guidelines and the Southend Essex and Thurrock Safeguarding Adults Guidelines.

4.1.4 The Service Provider will operate the highest standard of recruitment practice in line with the Southend Essex and Thurrock Safeguarding Children guidelines.

4.1.5 The Service Provider will liaise with the Designated/Named professionals for Safeguarding Children, Social Workers, the Multi Agency Safeguarding Hub (MASH), Education, Health Visitors, General Practitioners and other medical and nursing staff on child protection issues where required.

4.1.6 The Service Provider will implement a robust mechanism in place for the reporting of child protection concerns (in accordance with the Children’s Act 1989 and 2004).

4.1.7 The Service Provider will ensure all staff working with children and vulnerable adults have **enhanced Disclosure and Barring Service (DBS) check.** **In addition, a specific check is to be carried out to ensure the individual is not on the list of those barred from working with children and adults**. Newly appointed staff will not be permitted to commence work until a satisfactory DBS has been obtained and satisfactory references received and checked.

4.1.8 The Service Provider will report any DBS checks that have recorded any disclosures or intelligence from the police immediately to the Council (Children’s Services) and not proceed with any employment offer where this is identified

4.1.9 The Service Provider will ensure a senior member of staff is always available as safeguarding lead (management) trained to level 3

4.1.10 The Service Provider will prepare or contribute to professional written reports that contribute to child protection processes.

#### 4.2 Missing Episodes and Children/Young People away from placement without authorisation

4.2.1 The following processes are generic and cover: Supported Accommodation, Residential Care and Independent Foster Care Agencies (IFA’s) and their Foster Carers, and as such, uses language applicable to all services.

 4.2.2 The Service Providerwill agree to sign up to the ‘Missing from Care – memorandum of Understanding (MOU) between Southend, Essex and Thurrock Social Care and Essex Police’ where the Service Provider has Placements in Thurrock, Southend or Essex. This MOU now forms part of the Southend, Essex and Thurrock (SET) safeguarding children procedures.

 4.2.3 The following processes should be considered at the earliest opportunity, preferably at the placement planning meeting.

4.2.4 Where Children/Young People are considered to be at risk (defined as having previous missing episodes and/or concerns in relation to Child Sexual Exploitation, Gangs, Criminal Exploitation, Trafficking, Honour Based Abuse, Forced Marriage, Female Genital Mutilation (FGM) and Radicalisation) the Service Providerwill inform the Police Missing Person Liaison Officer (MPLO) on the arrival at the Placement of any ‘at risk’ Child/Young Person. If details are not known they should be established from the allocated social worker.

4.2.5 For Children/Young People at risk in the Essex area (including those placed by Thurrock Council and also those placed by other Local Authorities in the Essex area), the Service Provider shall complete a ‘Planning for Missing’ form and email this to

 missingpersonliaisonofficers@essex.pnn.police.uk securely with a copy to the Allocated Social Worker, if not before, then at the placement planning meeting and submitted within 24 hours of completion. A copy of this form is available from the Council.

 4.2.6 Risks and changes to Children/Young People considered to be at risk should be updated to the MPLO and the allocated Social Worker, or Emergency Duty Team (EDT) within 24 hours or within one hour if a serious risk is posed to the Child/Young Person.

4.2.7 Throughout the day the Service Provider/Foster Carer should undertake a ‘check-in’ call to each Child/Young Person to check that they are safe and well. The frequency of these calls will be dictated by the level of risk identified and agreed with the Allocated Social Worker.

4.2.8 **The definition of missing** – Anyone whose whereabouts cannot be established will be considered as missing until located and his or her well-being confirmed (College of Policing Authorised Professional Practice Guidance).

 4.2.9 Unaccompanied Asylum Seeking Children (UASC) may be subject of Trafficking offences in order to get into the UK. Once in the UK, they may be further trafficked and exploited. The sharing of information to police for all UASC placed in care is essential. Trafficking can be the movement, transportation, transfer or harbouring of children across continents, countries and borders for the purpose of exploitation of any kind. Trafficking can also be across counties, towns, or within a local area, for the purpose of exploitation. It is important to note that citizen Children/Young People can be trafficked within the UK for the purpose of exploitation. It is important to hold in mind the possibility that a missing Child/Young Person might be at risk of trafficking.

4.2.10 The Service Provider/Foster Carer shall agree with the allocated Social Worker a time when a Child/Young Person should return home from school, college during the evening and at weekends. In the event on non-return the following process will be initiated.

4.2.11 **Process for missing episodes**

4.2.12 The tasks that should be undertaken in these circumstances are set out below:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Step 1** | **Step 2** | **Step 3** | **Step 4** | **Step 5** |
| Child/Young Person does not return within agreed times (regardless of whether this is before the ‘standard’ curfew time set) | Service Provider/Foster Carer to attempt contact with the Child/Young Person by phone, text, social media, telephoning the child’s friends or family (unless there is reason not to contact the family).Search the placement address and grounds.Service Provider/Foster Carer to search the locality (see Step 3) (*Placement Providers* - by calling on-call staff where necessary to ensure the placement is not left unstaffed)  | **Whereabouts of Child/Young Person is known/identified****Reason for missing is a Child/Young Person is genuinely running late** - A time for the Child/Young Person to return will be agreed if they are genuinely running late or the Service Provider/Foster Carer will collect the Child/Young Person where required **Child/Young Person is considered to be in a safe place but has not been authorised to be there -** The Service Provider will use on duty or on-call staff (where only one member of staff on shift in supported accommodation placements) to collect the Child/Young Person. The Foster Carer will collect the Child/Young PersonAllocated Social Worker or EDT will be contacted within one hour to advise of the situation.**Child/Young Person is considered to be in an unsafe place and at risk of harm from the occupants of any property or in the company of others who are a risk –** The Service Provider/Foster Carer will notify the Police and explain the risk (within one hour or immediately if in immediate danger or if considered a Child/Young Person at risk)Allocated Social Worker or EDT will be contacted immediately to advise of the situationContinue to update the Police (via 101 quoting the incident number) / Social Worker / EDT of any new information**Whereabouts of Child/Young Person is unknown** Contact the Police within one hour of being missing or immediately if considered a Child/Young Person at risk or considered to be in immediate dangerContact the Allocated Social Worker or EDT within one hour to advise of the situationContinue to attempt to make contact / search for the Child/Young Person (if it is *believed* the Child/Young Person *may* be in a place that would place them or the Provider’s staff/Foster Carer at risk attempts to search the local area should not be made). The Police must be informed of such informationContinue to update the Police (via 101 quoting the incident number) / Social Worker / EDT of any new information | **Child/Young Person returns or is found –** Immediately inform the Police and Allocated Social Worker/EDT | **Follow up**The Police will conduct a **vulnerability interview**. Should this be declined the Service Provider/Foster Carer will assist the Police by providing observations on the Child/Young Person’s return i.e. did the young person shower, have gifts, appear unwell or under the influence of any substanceAny further information obtained will be updated to the Police/Allocated Social Worker/EDTThe Service Provider/Foster Carer will liaise with the Allocated Social Worker/EDT to arrange a return home interview with the Council’s independently commissioned provider The Service Provider/Foster Carer (with support from their Service Provider) will compile a full report and send this securely to the Allocated Social Worker within 24 hours of the missing episode starting and updated upon their return  |

4.2.13 The police will require details of the Child/Young Person as follows:

|  |
| --- |
| * Placement address
* Social Worker/EDT contact details
* Name
* Date of birth
* Status
* School/college/employer as appropriate
* Where and when they went missing
* Possible locations that the Child/Young Person be at
* Social media profile names of the Child/Young Person
* Who, if anyone, they went missing with – names/nicknames, description of possible persons who Child/Young Person may be missing with
* Details of vehicles that the Child /Young Person may have been in prior to the missing period or previously
* What was the Child/Young Person wearing plus any belongings such as bags, phones etc.
* Description and recent photo
* Medical history and NHS number
* Time and location last seen
* Circumstances around being missing
* Details of family, friends and associates
* Risks and vulnerabilities
 |

4.2.14 The Service Provider/Foster Carer shall support the Child/Young Person to understand the reasons for being missing, and to minimise the likelihood of there being future episodes. The reasons which led to the episode should be built into support/care plans immediately and this will be a focus of support over at least the next two weeks after the episode.

4.2.15 The Service Provider/Foster Carer will, in sympathetic and understanding manner gather information about where and with whom the Child/Young Person was with, sharing this with the Allocated Social Worker/EDT.

#### 4.3 Safe Recruitment

4.3.1 The Service Providerwill ensure that there are robust recruitment processes in place. The Service Providershall adhere to the following requirements as a minimum:

1. Obtain 3 written references, one from the current or last employer, and make telephone contact with the referee to confirm authenticity and obtain additional information
2. Undertake an enhanced Disclosure and Barring Service (DBS) check with a local police intelligence check for every member of staff including those that perform office functions and do not work direct with children
3. Work history will be checked with any gaps investigated and recorded ensuring that the Service Provider is satisfied with any explanation, checking this with previous employers
4. Re-check DBS checks every 2 years as a minimum
5. Only accept previous DBS certificates from previous employers if the member of staff was employed in an identical role. If this is not the case a new check will be undertaken by the Service Provider
6. Maintain a database of DBS certificate numbers, their date and their renewal date
7. Issue all employees with two copies of their job description and contract of employment. One of each of these documents is to be signed and dated by the employee and placed in their staff file. The contract / job description should detail: employment commencement date, number of hours employed, duties and responsibilities, skills/attributes required, training or qualification that is a pre-requisite of employment or expected post-employment with the Service Provider.
8. Keep a record of all employees that will include: date of birth, home address and telephone number, details of the DBS checks, copies of passport and/or photo driving licence. Photo identification must be seen (only a valid passport or valid photo driving licence is acceptable), copy of birth certificate, copy of marriage certificate where relevant, proof of residence in the form of a utility bill or tax letter (dated within the last 3 months), certified copies of relevant qualifications and relevant training certificates, a completed application form for the role
9. Undertake robust employment processes including interviews with two members of staff assessing the suitability of a candidate

4.3.2 Where a member of staff is required to drive as part of the role a copy of their driving licence will be required, a copy of insurance cover that includes business use, a copy of proof that the vehicle is taxed, has an MOT and is appropriately serviced.

#### 4.4 Section 11

4.4.1 The Service Provider shall complete a Section 11 Safeguarding self-audit on an annual basis for submission to the Council’s Local Safeguarding Children’s Board and the Commissioning Team. The format of this will be provided by the Council.

#### 4.5 Policies required

4.5.1 The Service Provider will maintain the policies overleaf (this is not an exhaustive list). These policies will be subject to review by the Council to ensure that they are to a high standard. Every policy will be reviewed every 3 years or sooner if legislation/guidance changes and necessitates a review.

|  |  |
| --- | --- |
| * Safeguarding Children
* Safe recruitment
* Child Sexual Exploitation (CSE)
* Event and Notifications
* Equality and Diversity
* Staff Supervision
* Missing episodes
* Anti-radicalisation
* Out of hours
 | * Visitors
* Health and Safety
* Complaints
* Medications
* Internet use
* Staff conduct
* Whistleblowing
* Business Continuity Plan
 |

### 5. REPORTABLE EVENTS/INCIDENTS

5.1 The Service Providerwill notify the Council immediately in the event of an incident of any event that occurs as detailed in the list below.

* Death or serious injury
	+ The illness or medical condition of a Child or young person (other than a common cold)
	+ Any fears for the safety of a Child or Young Person
	+ Any risks in respect of Child or young person Sexual Exploitation (CSE), other exploitation, prostitution and possible or confirmed gang involvement
	+ Any situation that threatens the Young Person’s wellbeing, including self-harm, attempted suicide or suicide ideation
	+ Any significant change of mood in the Young Person
	+ The unauthorised absence (knowing where a Child or Young Person is but this being unauthorised)
	+ Child or young person that is missing from the placement (not knowing where a Child or young person is)
	+ Allegations of abuse, physical or sexual, to or by a Child or Young Person placed with the Provider
	+ Restraint or physical intervention with a Child or Young Person
	+ Any disturbance, threatening behaviour, violence, a Child or Young Person placing themselves or others at risk, or any criminal offence being committed, regardless of whether the police are called
	+ Child or young person being arrested or cautioned by the police
	+ Any service related staffing / buildings issue that affect the ability to provide a safe environment for Children and Young people, or any staffing issue that lasts more than 24 hours that affects the ability to deliver support sessions with children and young people
	+ In the event that a Child or Young Person expresses a view that they no longer wish to remain at the Provider
	+ Any event that may affect the stability of other children and Children and young people who are placed with the Provider
	+ The suspension of any member of staff for conduct reasons
	+ Any disciplinary action that is taken in respect of any member of staff
	+ The receipt of any formal complaint from a Child or Young Person, whether this be received verbally or in written format

5.2 The Service Provider shall report the incident to the Allocated Social Worker during normal office hours or to the emergency duty team (EDT) outside of office hours, during the evenings (after 5.30pm), weekends and public holidays.

5.3 Initial notification will be made via telephone. Email notification will serve only as confirmation and should not be relied upon to replace a telephone conversation. Details of the name of the social worker or EDT contact, dates and times should be recorded by theService Provider.

5.4 Following a reportable incident the Service Provider will complete a full report with details of the event, dates and times. This should be stored electronically within the Service Provider’s system and emailed to the allocated social worker within 24 hours after the initial telephone notification took place. The report shall include the precedent, incident and antecedent and include details of whether medical attention was required and if the complaints procedure was offered. The Service Provider shall also prepare a statement of the Child or Young Person’s views with their signature.

### 6. STAFF

#### 6.1 General

6.1.1 The Service Provider shall recruit/provide suitable and appropriately competent and qualified staff to deliver the Residential Care Service. Workforce design shall reflect the competencies required to deliver all aspects of the Services in line with the National Minimum standards.

6.1.2 The Service shall be carried out in a manner that ensures safe, efficient and high quality delivery and shall be maintained, reviewed and audited at least annually.

6.1.3 The Service Provider must have in place procedures to manage staff absence whether planned or unplanned to ensure there are no risks to deliver of the Service.

6.1.4 The Service Provider shall have in place clear policies for:

* Supervision, including safeguarding
* Staff appraisal
* Individual professional development plans
* Education and training

6.1.5 Supervision will be informed by best practice and will consider the following:

* Staff wellbeing, particularly Staff’ emotional wellbeing
* Work load
* Practical issues and standards
* Reflective practice
* Service standards

6.1.6 The Service Provider must put in place a workforce development programme must to ensure continual professional development.

#####  Staffing ratios

6.1.7 The Service Provider will be able to demonstrate sufficiency in terms of the number of staff to cover all aspects of the Service in line with the national minimum standards for residential homes.

#### 6.2 Staff Supervision

6.2.1 The Service Provider will ensure all staff receive regular supervision on a monthly basis as a minimum. Details of the supervision will be recorded and held on staff files.

6.2.2 Managers shall be trained and qualified to deliver supervision, including reflective practice supervision.

6.2.3 All staff will have an annual appraisal focussing on their performance throughout the year; development needs identified and continual professional development opportunities. Any areas requiring improvement will be translated into an action plan.

6.2.4 Where particular areas of practice are known to be problematic for a member of staff, the Service Provider shall address the issue through supervision in order to determine an appropriate training pathway.

#### 6.3 Staff Induction

6.3.1 Staff will receive an induction prior to commencing duties from more experienced staff. This will include as a minimum:

* An introduction to the organisation and its ethos
* Detail of organisation policies – these should be explained and not simply left with the member of staff to read
* Safeguarding – training should be delivered to level 2 before commencement of duties
* Procedures and forms
* Health and Safety
* The Placementand its workings
* Lone working procedures
* Key contact details for other staff / other agencies and Services / out of hours safeguarding contacts
* Procedure for missing episodes
* Incident procedure
* Dealing with violence and aggression
* Fire and electrical safety

#### 6.4 Staff training

6.4.1 The Service Provider shall ensure they carry out a training needs analysis of all staff employed in the delivery of the Service prior to commencement, with the relevant training programme put in place.

6.4.2 All training relevant to provision of the Service will be funded by the Service Provider, and not by the member of staff.

6.4.3 The Service Provider shall ensure training needs are reviewed at each supervision session, with an annual plan put in place for each member of staff. The Service Provider will support and funds continual professional development for staff.

6.4.4 All Staff directly working with Children and Young People shall receive mandatory training as set out below to the following timescales:

|  |  |
| --- | --- |
| **General Training** | **Completed by (mandatory timescale)** |
| Safeguarding children (to level 2 – level 3 for managers | Before exposure to Children and Young People without additional support |
| Health and Safety at work | Within one month of employment |
| Child Sexual Exploitation (CSE) | Within two months of employment |
| Emotional wellbeing and mental health | Within three months of employment |
| Coaching children to develop coping strategies that promote emotional resilience |
| Promoting and develop Children’s emotional well-being including how to access additional help if required; |
| Identifying and responding to early indicators of mental health issues |
| Undertaking behaviour management including anger management programmes |
| Identifying early signs of substance misuse and addiction |
| Providing advice and information about sex education and sexual relationships |
| Engaging techniques for de-escalation and physical interventions defined in the Placement’s Statement of Purpose |
| Equal Opportunities | Within six months of employment |
| Substance misuse – drugs and alcohol |
| Self-Harm |

6.4.5 The choice of training course will be down to the Service Provider, providing it meets the needs and timescales set out in 6.4.4 above. All staff will complete refresher courses in accordance with the training body’s recommendations;

#### 6.5 Team meetings

6.5.1 The Service Provider shall hold team meetings at least every 2 months, recognising that not all of the team may be able to be together at the same time. Team meetings should cover: updates to policy, discussion and reflection on issues identified in the previous period, focus sessions on particular areas i.e. safeguarding, training opportunities, Service improvement methods and any other items that the Service Provider thinks relevant.

#### 6.6 Staff conduct

6.6.1 The Service Provider shall implement and manage a code of conduct that includes as a minimum that:

* Staff dress appropriately in smart clothing
* Staff do not smoke or vape whilst on duty, whether this be within sight or out of sight of Children and Young People within the centre
* Staff make healthy food choices whilst on duty and act as a role model for Children and Young People to do the same
* Staff do not engage in connecting with any Children or Young People on social media and should be mindful of their use of social media where this may be able to be viewed by Children or Young People

#### 6.7 Lone working

6.7.1 The Service Provider will implement a lone working policy that ensures staff who work alone work within the framework of a risk assessment which considers all potential risks and their mitigation.

6.7.2 The Service Provider shall ensure there should is adequate backup support from other members of staff or management that can be ‘on-call’ and within 20 minutes travel distance to the Placement where required.

6.7.3 Where the option of waiting for support is overridden by the urgency of situations the Service Provider shall make staff aware of the procedure for notifying the police and other emergency services.

6.7.4 Staff should be equipped with safeguards that ensure they can work safely, including but not limited to; the provision of mobile phones and anti-attack alarms and facilities for the remote monitoring of staff. This can include CCTV (with due regard to The Protection of Freedom Act, 201*2),* the use of set code words that if transmitted to another member of staff would initiate a response if the member of staff sending the code word was in danger.

6.7.5 The Service Provider shall operate a system of regular check-ins with lone working Family assessors that operate 24 hours a day.

### 7. PARTNERSHIP WORKING AND DATA

#### 7.1 Attendance at Key Meetings

7.1.1 The Service Provider will ensure Staff attend the following relevant meetings where the work carried out is able to make a positive contribution to those meetings.

* Team around the child meetings (TAC)
* Team around the family meetings (TAF)
* Core Group meetings
* Child Protection conferences
* LAC reviews

7.1.2 Where Staff are not available, the Service Provider will provide relevant details about the Child or Young Person as may be requested by the Allocated Social Worker. The attendance of these meetings will be monitored by the Council:

#### 7.2 Sharing information / Working with Partners

7.2.1 The Service Provider will practice effective information sharing with partners within the guidelines set out in the local safeguarding procedures and within the remit of the General Data Protection Regulations.

7.2.2 The Service Provider will work in an integrated manner, working with colleagues from other Services that support families as well as statutory Services including, but not limited to children’s social care and the police.

7.2.3 The Service Provider will:

* Identify their own role and the roles, criteria and procedures of other agencies and Services and how these influence inter-agency working
* Establish and maintain effective joint working arrangements with other agencies and Services
* Prepare and communicate relevant information to other agencies and Services following agreed procedures to ensure effective support for families
* Contribute to team and inter agency working within the limits of their own responsibility and expertise
* Share information and experience of working with families through formal and informal networking, to improve the quality of Services
* Make effective use of other agencies and Services to support their own role

#### 7.3 Data Sharing

7.3.1 The Service Provider will sign up to the Thurrock Council Data Sharing Protocol.

7.3.2 The Service Provider shall supply all information/data required by the Council within the timescales set out at the time, which will not exceed 45 calendar days, but may be required more urgently if there are legal or other constitutional requirements. There will be no charge made by the Service Provider for the provision of such information.

7.3.3 At the end of the contract, or upon termination, whichever comes sooner the Service Providerwill transfer all data / records, whether in paper or electronic format, back to the Council.

#### 7.4 Data Protection and Processing

7.4.1 The UK government have now introduced the Data Protection Bill (replaces the Data Protection Act 1998) which enables the UK to continue as is once the UK exits the EU. The new Bill includes all the EU standards as set in the General Data Protection Regulations (GDPR) as well as some UK specific elements relating to Law Enforcement and National Security.

7.4.2 The Service Provider will comply with all legislation and best practice regarding Data Protection, including the GDPR and Council Policies as set out in Appendix 5, and any updates to these that come into force during the term of the contract.

7.4.3 The Service Provider will act as a ‘**Data processor**’ on behalf of the Council. The new GDPR will bring increased responsibility and accountability for data processors, with the Information Commissioners Office (ICO) being given new powers to issue financial penalties against data processors that do not adhere to the guidelines.

7.4.4 The Service Provider will ensure that it only sends confidential personally identifiable information to the Council and third party agencies via two specific methods of communication:

1. By hand to the receiver of the information if this is paper based – documents should not be posted and should be passed directly to a member of staff and not left at any reception desk
2. By utilising the ‘Objective Connect’ programme that the Council uses for secure data transfer (or any future applications the Council may utilise in its place)

7.4.5 Under no circumstances shall the Service Provider send personal and sensitive information to the Council or any other agency or Service via standard email. In cases where Council staff are not registered with this system the Service Provider must request that they gain access before sending information. Where the request is urgent and cannot wait for this to be put in place information must be provided verbally.

7.4.6 Any deviation from this process will be viewed as a serious breach of this Contract.

7.4.7 The Service Provider will collect and hold only relevant data under the ethos of ‘appropriate collection’.

7.4.8 Records for children on a child protection plan have to be retained until the 75th anniversary of the child’s birth. Ordinarily all data and case notes whether they be electronic or paper based will be transferred back to the Council (or at the Council’s discretion, to a replacement Service Provider) at the end of the contract. However, in the event of any long standing ongoing contract the Service Provider will ensure that records are held for these periods of time.

7.4.9 Where the Service Provider is collecting data in its own right i.e. not under the responsibility that the Council gives the Service Provider to act as data processors, it will register with the UK Information Commissioners Office (ICO) as a data controller.

#####  Consent and Confidentiality

7.4.10 The Service Provider will ensure:

* Information shared with other agencies is on a need to know basis or when required to do so under the law or for the purposes of the protection of the Child or Young Person or of the public
* Information is only shared when it is in the best interests of the individual
* Provider staff follow information sharing guidance in accordance with the principles of the GDPR Regulations (EU/2016/679) and/or subsequent legislation which may come into force
* Service user information is kept confidential except where there is a perceived or actual risk of harm which precludes this and/or it is required by law
* Records are kept up to date and secure and there is a records management policy in place
* Staff receive appropriate data protection training on a regular basis

### 8. COMPLAINTS AND CONCERNS

#### 8.1 Complaints and Whistleblowing Procedure

8.1.1 The Service Provider will maintain a documented complaints process for Children and Young People resident within the Placement. This will be readily available and publicised in a range of accessible ‘user friendly’ formats and displayed on the Service Provider’s premises. The process will cover both adults and children.

8.1.2 As an outline, the procedure will be established on the basis of a three stage process. Stage 1 will be an informal discussion with a manager of the Service. Stage 2 will be a formal written complaint to the Service Provider, dealt with by another manager (other than the one that dealt with the stage 1 complaint) and stage 3 will be escalated to the most senior person within the organisation.

8.1.3 The Council will inspect the Service Provider’s Complaints policy to ensure it is robust, and the Service Provider will supply regular summary reporting on complaints to the Council.

8.1.4 The Service Provider will immediately report to the Council any complaints that reach a final stage of the process (stage 3).

8.1.5 The Service Provider will establish a whistleblowing policy to allow staff to anonymously and confidentially report any concerns via an independent method, i.e. not through the management of the Service.

#### 8.2 Complaints and concerns via Ofsted

8.2.1 Ofsted may receive complaints or concerns directly about a residential setting. When considering complaints, it does not act as a complaints adjudicator, but investigates concerns to make sure that the Service Provider continues to meet regulations, the associated national minimum standards, and remains suitable for registration. Where they do not Ofsted may take compliance action.

8.2.2 Ofsted will investigate all instances that suggest a residential setting does not meet legal requirements. Where there is non-compliance Ofsted take action to ensure Service users’ safety and compliance with the law via a range of powers that including issuing a compliance notice, restricting accommodation, cancelling a Service Provider’s registration or prosecuting for an offence.

8.2.3 The Council will review the detail of complaints and investigations that involve Ofsted and will put into place appropriate action plans with the Provider where these are required. Should the issue be assessed as sufficiently serious to place Children and Young people at risk the Council may suspend the Provider and consider termination of the contract.

8.2.4 The Service Provider shall provide detailed information about how it deals with complaints about the Service Provider and / or other Service users.

8.2.5 Residential Care Service Providers must comply with the requirements of the regulations and meet the national minimum standards for residential care provision.

### 9. PROCUREMENT ROUTE AND TERM

9.1 The Council will operate a Rolling Select List contract for a 6 year period which commenced in February 2019. The Rolling Select List will consist of Service Providers who are successful following the completion of the tender exercise. Once the Rolling Select List is in place new Service Providerswill be permitted to join the Rolling Select List every twelve months during a short period when applications will be submitted and assessed.

9.2 The Council will additionally carry out on-site inspection of the Placements to validate accommodation, staffing and other standards before confirming that the Service Provider is accepted onto the Rolling Select List.

 ***The Council does not guarantee any placements throughout the term of this Rolling Select List contract.***

### 10. REFERRALS

#### 10.1 Referral criteria

10.1.1 All referrals to the Service will be made by Thurrock Council Children’s Services Department. No self-referrals or referrals from any other agency such as the National Health Service (NHS), Police Service (non-exhaustive list) will be accepted by the Service Provider*.* Note that referrals will be for Thurrock looked after Children and Young People only.

#### 10.2 Referral process

10.2.1 Upon referral the Council will supply all relevant information including LAC documents prior to the commencement of the placement where the placement is made on a planned basis, or within 3 working days where the placement is made in an emergency.

10.2.2 The Council will carry out an assessment prior to placement that shall identify the type of placement suitable to meet the individual Child or Young Person’s needs. Only children who have been assessed as being likely to benefit from placement, both in relation to their assessed care needs and where applicable their assessed educational needs, shall be eligible for the service.

#### 10.3 Service Provider Response

10.3.1 The Council will advise the Service Provider of the category of urgency for the placement at the time of the referral. The Service Provider will therefore respond to the Council within the following timescales to advise if a suitable placement is available.

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| --- | --- |
| **Referral Category** | **Provider to respond within** |
| Emergency Referrals | One (1) hour |
| Standard Referrals | One (1) working day |
| Planned Placements | Three (3) working days |

10.3.2 As part of the admission procedure, the Service Provider shall arrange for the Registered Manager, School Head Teacher (if applicable) and the Allocated Key Worker (where possible) to visit the Child or Young Person in their place of residence and their school before admission to the residential placement.

10.3.3 The Service Provider shall then enable the Child or Young Person to visit the Residential Placement, and where applicable the School, where the time-scales of the referral process allow.

10.3.4 The Service Provider shall supply each Child or Young Person with a copy of the ‘children’s guide’ prior to moving in, along with any additional information/‘welcome pack’ the Residential Placement provides.

### 11. ORDERING PROCESS

11.1 Once the response to the referral request from Service Providers is received, the Council will consider the suitability of the placement in accordance with the criteria set out below

 *Placements will be made based on the Service Provider’s final rank following evaluation of their tender response and the suitability of the placement in order of preference in the following locations of the proposed Placement (with 1. being most preferred):*

1. *In Thurrock*
2. *In a specific area – dependent on a Child or Young Person’s needs (agreed by the Council)*
3. *Within 10 miles of Thurrock Council Civic Offices (RM17 6SL)*
4. *Within 20 miles of Thurrock Council Civic Offices (RM17 6SL)*
5. *Other locations*

11.2 The Council will then will contact the most suitable Service Provider when an appropriate placement is identified to confirm availability and secure acceptance.

11.3 On acceptance of a placement, and the Council and the Service Provider will complete an Individual Placement Agreement as set out in the Rolling Select List Contract Schedule Five.

### 12. SERVICE DETAILS

#### 12.1 Service Overview

12.1.1 The Council is seeking to commission high quality residential care to Young People **aged 16 and 17** that meets their individual needs and delivers meaningful evidenced outcomes as specified in their Individual Care Plan or Pathway Plan which will incorporate their Placement Plan, Health Plan and Personal Education Plan or in the case of a Child or Young Person with Special Education Needs or Disability “SEND”, their Education, Health and Care Plan (EHCP). **It is expected that the placement will only accept placements for young people aged 15-17. For Thurrock placements this will only be for 16 and 17 year olds who have care needs greater than the support that can be offered in an unregulated supported accommodation setting.**

12.1.2 The Rolling Select List will enable the Council to have priority access to appropriate high quality residential care from a range of providers, for children in care who have a wide range of needs.

12.1.3 The Service must be:

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| Reliable | Children and Young People need to be able to depend on the service. The service shall be delivered as specified and not changed or discontinued without the written agreement of the council. It must be a robust service which is able to withstand the demands made upon it. |
| Flexible | The service must be able to respond to Individual Children and Young People and their changing needs, recognising that provision may need to be adapted to meet a range of complex needs. |
| Sufficient | The service must be able to enable Children and Young People to live an ordinary and fulfilling life and be part of the overall network of support. |
| Co - ordinated | Services should be co-ordinated and adopt a multi-agency approach |

12.1.4 Statutory responsibility for the Child or Young Person and for monitoring their individual progress ultimately rests with the Council and will be exercised through the Child’s Social Worker “the Allocated Social Worker”, educational psychologist where applicable, and statutory review procedures. The Service Provider will however, be responsible for the delivery of the service and day to day monitoring of the Child or young person’s well-being and progress as defined in the Child or Young Person’s LAC Care Plan, and where appropriate IEP and / or PEP.

12.1.5 The Service Provider shall supply Children and Young People with 24 hour care, support and accommodation for the duration of the Residential Placement within a safe environment that is tailored to the individual needs of Children and Young People.

12.1.6 Throughout the placement, the Service Provider will work to assist with the implementation of the LAC Care Plan, including as applicable the pathway plan, health plan, Education, Health and Care Plan (EHCP) and Personal Education Plan (PEP), provided by the Council. The Service Provider will supply written progress reports, court statements and assessments on individual Children and Young People for planning meetings, safeguarding meetings, review meetings and court proceedings as required.

12.1.7 The Service Provider will facilitate Children and Young People’s attendance and participation at local consultation, engagement, participation and advocacy forums.

12.1.8 The Service Provider will ensure that Children are supported to have meaningful contact with siblings, parents and relatives as specified in the Child or Young Person’s Care Plan.

12.1.9 The Service Provider will ensure at all times that the Service and care decisions are centered on meeting the assessed needs of the Child or young person, seeking to value and promote the identity of the Child or Young Person as well as improving their well-being, life chances and potential.

12.1.10 The Service Provider will promote an ethos, culture and practice within the residential placement, engaging with external professionals and services and where appropriate, those with parental responsibility, to achieve the expected outcomes.

#### 12.2 Ofsted Regulation/National Minimum Standards

12.2.1 This Specification is underpinned by the contractual requirement of the provider to comply with the Children’s Residential Placement ’s Regulations 2015 (as amended in 2018), the National Minimum Standards for Children’s Residential Placements, the statutory guidance promoting the health and wellbeing of looked after children (Department for Education & Department for Health) and in relation to Schools where provided as part of the Service, the Education (Independent School Standards) (England) Regulations 2003. The service will meet its obligations to the regulator, Ofsted.

12.2.2 The Service Provider will confirm it is registered with Ofsted during the tender process and shall, at any time during the contractual term notify the Council within two working days if Ofsted raise any regulatory concern in respect of such registration or if their grading falls below “Good”. The Council will not seek to place Children and Young People with providers who have a grading that falls below “Good”.

12.2.3 The Service Provider will seek to exceed “Good” through innovative care and - where applicable - teaching practices, and demonstrate a commitment to continuous improvement through the residential placements and where applicable the school’s internal quality assurance procedures. The delivery of the service will be consistent with the residential placement’s statement of purpose and function as approved by the regulatory body.

12.2.4 The Service Provider will deliver a service that is centred on Children and Young People, their development and personal interests. As a corporate parent, the Service Provider will listen and hear what Children and Young People are saying and telling them, support their personal interests by using knowledge, skills and experience to guide them to develop to their best potential.

#### 12.3 Children with Disabilities and SEND

12.3.1 In all outcomes and Service delivery, the Service Provider will ensure that a range of methods and practices are used to empower and support all Children and Young People, including those with complex learning difficulties and/or physical disabilities, and those with significant medical needs including those who receive nursing care in a dual registered residential placement to ensure that they are enabled to participate and make a positive contribution. The Service Provider’s care practices must challenge barriers to inclusion and equal access to opportunities for work, training and social participation.

12.3.2 The Service Provider will ensure that the Placement is implementing good care practice based on current research and evidence.

12.3.3 All Children and Young People with complex learning difficulties and/or physical disabilities are treated first and foremost as a Child or Young Person. Throughout this Contract all references to “Child or Young Person” or “All Children” includes those with complex learning difficulties and/or physical disabilities.

12.3.4 The Service Provider will adapt outcomes and targets set in this Specification to take particular account of the aptitudes, abilities and interests of the individual Child or Young Person. Targets and expectations should always be stretching and aspiring, seeking to add value to Children and Young People’s experiences and outcomes and to close the gap of disadvantage and disproportionate poor outcomes and achievements for ‘Looked after Children’.

12.3.5 If the Service Provider is registered to provide nursing care with the appropriate Statutory Agency, the Council may commission the Service Provider to deliver nursing for Children with Disabilities as part of the Service.

#### 12.4 Outcomes underpinning this Service Specification

12.4.1 This Service Specification sets out the requirement for the Council and the Service Provider to work in partnership with a robust focus on placements that achieve optimum outcomes relevant to the individual Child or Young Person within the framework of the Children’s Act and the five outcomes for children to enable them to achieve more in terms of standards in the regulations, being that children should

|  |
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| 1. Be Healthy
2. Stay Safe
3. Enjoy and Achieve
4. Make a Positive Contribution and
5. Achieve Economic Well-being
 |

12.4.2 In addition, this Service Specification has taken account of the seven key outcomes identified by Children at the Children’s Rights Conference 2005 that Children should:

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| --- |
| 1. Be Happy
2. Have enough Food and Drink
3. Stay in Contact with Family
4. Have Friends
5. Have Fun
6. Experience Love
7. Receive Respect
 |

12.4.3 The Service Provider shall display a copy of the Service Specification at the residential placement, and where applicable the School, for reference by all Staff, Children and Young People. The Service Provider must ensure that it’s Registered Manager and in the case of a School, the Head Teacher, and Staff are fully aware of, supported to and working to deliver a Service that meets the Specification.

#### 12.5 Outcomes for Children and Young People

12.5.1 Delivering high quality outcomes for Children and Young People is critical for delivery of the Residential Placement Service. The tables on the following pages set out the Service requirement for Children and Young People to achieve these outcomes. These are in two parts:

 Part 1: All Residential Placements

 Part 2: Additional Outcomes for Placements with Education

 For avoidance of doubt, if the commission is for a Placement with Education, the Service Provider shall deliver the Service to meet the outcomes for both Part 1 and Part 2.

**OUTCOMES FRAMEWORK**

| **Part 1: All Residential Placements - the Service Provider must ensure that** |
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| **Outcome: Be Healthy** |
| 1. Children are able to make appropriate attachments, develop resilience and experience emotional well-being through a sense of belonging and relationships with a consistent team of carers who care for them | Staff have a caring approach and have emotional resilience to deal with children’s challenging emotional distress and high levels of dependency;Staff promote protective and comforting behavior and an understanding of appropriate touch;Staff demonstrate an active interest and involvement in all aspects of children’s lives;Staff promote positive relationships based on mutual respect and care for all, both within and outside the placement;The staff group reflects the diversity of society, and provides positive role models for all children in terms of special needs including any disability, age, religion; racial origin, sexual orientation, culture and language;Staff are competent and skilled to be alert and responsive to children’s emotional wellbeing and staff are skilled and competent to support children, and access additional help if required;All staff are competent and skilled to identify and respond to early indicators of mental health issues such as self-neglect, self-harm and depression. |
| 2. Each Child or young person has at least one significant adult whom they trust to communicate with  |
| 3. Children have optimum mental health and emotional well-being through feeling valued and having good self-esteem and are equipped to cope with life’s challenges; | Each Child or young person is encouraged to make their own positive choices and decisions about their health, treatment, and life-style;Staff are competent and skilled to help Children to develop coping strategies that promote emotional resilience, and skills to deal with all forms of discrimination;Staff use a range of strategies to encourage and ensure Children attend and engage with therapeutic and/or health specialist services in line with their assessed need;Staff are competent and skilled to offer Children mental health promoting activities that allow Children to manage their emotions. Where more specialist anger management programmes and other accredited programmes such as counselling are required, the Provider shall work with the Council to ensure Children can access these. These may be provided by the Provider having regard to the Placement’s Statement of Purpose, or by externally commissioned services;That any therapeutic services whether provided by staff employed directly by the Placement, or commissioned independently, are undertaken by appropriately qualified and supervised practitioners. Clinical governance arrangements are in place to monitor and supervise provision of therapy provided by staff employed at the Placement;Achievements are celebrated to reinforce and motivate good health and well-being |
| 4. Those Children with an identified assessed need, access agreed mental health specialist services and/or therapeutic services. |
| 5. Children value the importance of their health and well-being and do not participate in harmful activities — particularly smoking, alcohol and substance misuse. | Staff are competent and skilled to provide information about the risks of smoking, alcohol and substance misuse;There is a no smoking policy for children and a no smoking policy for staff which applies to staff on duty at all times whether on or off site with children;Staff are competent and skilled to look for early signs of substance abuse, misuse and addiction and take timely and appropriate actions to address these. |
| 6. Children establish/sustain and develop optimum physical health | Staff use a range of strategies to encourage and ensure Children attend regular routine health checks and statutory health assessments and engage in any necessary treatments;All Children have equal and appropriate access to universal and specialist health care. Wherever appropriate, Children are empowered and supported to take increasing levels of responsibility for their own health and well-being;Staff encourage Children to use any necessary aids and/or adaptations with increasing self-determination and reduced need for prompting. |
| 7. Children, access appropriate advice, support and where appropriate, treatment, with regards to their emotional well-being, physical and mental health. |
| 8. Children with complex learning difficulties and/or disability achieve Maximum mobility and independence. | Strategies and resources are deployed to support Children to achieve maximum mobility and independence. Specialist equipment is maintained, and its usage monitored to ensure it remains fit for purpose. The Provider ensures that as the Child or young person grows, specialist equipment is replaced and updated as necessary.Reasonable adjustments are made to the environment and care practices to meet the requirements of the Disability Discrimination Act 1995 and 2006. |
| 9. Children, as appropriate to their age, are able to make informed decisions about engaging in sexual relationships. | Staff are competent and skilled to educate Children having regard for their age and understanding, about sexual health, sexual relationships, the prevention of sexually transmitted infections and unplanned pregnancy. All staff and Children are able to access more specialist help and services if required. |
| 10. Children know how to stay healthy through good diet and regular exercise in line with government initiatives on healthy eating; | Staff are competent and skilled to help Children to understand the importance of healthy eating, the importance of observing special dietary needs, and the dangers of eating disorders;Staff promote independence in managing special dietary needs;Resources are deployed, including funding and staff, to support the access of all Children to hobbies/activities that promote good health and regular exercise, on a regular and frequent basis |
| 11. Children are engaged in preparing healthy meals in the placement, and Children learn meal preparation skills for independence. |
| **Outcome: Stay Safe** |
| 1. Children are safeguarded from bullying, self-harm, absconding, accident, injury, death, discrimination, crime, anti-social behaviour and abuse maltreatment, neglect, violence, and sexual exploitation. | Children have various opportunities to disclose safeguarding issues; Child protection procedures, staff training and practices explicitly address how vulnerable Children are to be safeguarded from abuse, and how indications of abuse can be identified and acted upon;Every Child or young person has a recognised mode of communication that is understood and used by all staff;Child protection policies and procedures include safe caring policies which provide clear guidance and rules about appropriate touch and being alone with Children;Staff are competent and skilled to undertake risk assessments to ensure the safety of Children whilst achieving a balance between safety, security and promoting Children’s independence and risk assessments take account of each Child’s perceptions of, and attitude to, risk;Staff that are responsible for writing and updating Children’s Placement Plans are also trained and competent to write and implement written risk assessments and behaviour management plans to manage and minimise the risks to the individual Child. These are completed as part of the Placement’s care planning process;Staff take reasonable steps to ensure that Children who enter any employment training or work experience do so in a safe and legal environment. This will necessitate staff at the Placement undertaking a risk assessment and ensuring the employer carries appropriate insurance;Staff understand the importance of, and facilitate Children to have, private contact with their social worker or other significant adult either by telephone or private meeting place within the Placement, or away from the Placement, so that Children can raise any worries about their Placement freely;The Provider works with the Council to ensure that those Children who have opted not to see an advocate or independent visitor on a regular basis, are aware of who to contact and are able to access such services easily if they wish to at a future time and the Provider is able to provide documentary evidence to this effect;Staff regularly encourage Children through key worker sessions, house meetings and LAC reviews to understand their rights and responsibilities and how to raise concerns and complaints as well as how to access an independent advocate;Rules and permissions to do things are decided on an individual basis, taking into account age, level of risk for the individual Child or young person and how trustworthy they are, to enable Children to progressively develop their independence in a safe and informed way;Staff follow the Council’s multi-agency protocols for Children who go missing from their Placement and the Provider maintains a protocol (agreed between the Council and the Provider) to record any “handover” arrangements;There exists a strong culture in the Placement that bullying and discriminatory behaviour is not tolerated and this is supported by rigorous policies and procedures that counter bullying and discriminatory attitudes and behaviour from staff, Children and visitors. |
| 2. Children are treated fairly and as individuals, taking full account of their abilities, special needs, disability, age, religion, racial origin, sexual orientation, culture and language. | Staff are competent and skilled and resources are deployed to ensure that each Child or young person is treated as an individual. This includes explicitly, the promotion of each Child’s ethnicity, religion or belief, language, gender, sexual orientation and cultural heritage in order to support the development of a positive identity and realization of their full potential. Such considerations are at the forefront of individual care planning and service development. |
| 3. Children have safe access to the internet and safe use of mobile phones. | There are systems in place to protect Children from the risks of internet sites (e.g. Chat rooms), mobile phones and inappropriate/unwanted photography and filming. Staff take steps to ensure Children are well informed of the risks and how to protect themselves from potential risks. |
| 4. Children are not unnecessarily or inappropriately restrained. | Behaviour management plans and risk management strategies are in place for each individual Child or young person which identify the most effective de-escalation strategies to calm down situations that may lead to the need for physical interventions, as well as identifying work to be undertaken to equip Children with positive ways of managing their anger and anxiety to prevent it from leading to high risk behaviours;Staff training and practices explicitly address how Children are safeguarded from unnecessary restraint. |
| 5. Children feel secure and have stability | At all times, the Placement is fully staffed, and steps are taken to recruit to fill vacancies as soon as they occur and staff turnover is minimised through good employment practices and support for staff, thereby promoting stability and continuity of relationships for Children;Arrangements for covering staff absences are factored into the core staffing capacity and the Placement is not reliant on staff working over-time, or the use of agency staff other than for exceptional unplanned staff shortages;The Provider, in partnership with the Council, does all they can to promote stability within the Placement and avoid emergency Placement breakdowns;Where a Child or young person is involved in a critical incident that threatens the stability of their Placement, if a period of respite is agreed, a meeting will always be held to review the Care Plan and risk assessment and make a decision that represents the best interests of the Child;Staff are pro-active in requesting/convening such meeting where required, to minimise the risk of irretrievable breakdown and disruption to continuity of Care for Children;There is minimal use of the Police, and there are suitable procedures in place to deal with incidents in the Placement. The Provider and staff avoid involving the police in incidents at the Placement that would not normally attract police involvement if the incident occurred in people’s own families and work jointly with any relevant initiatives. Children are able to personalise their rooms, and are not expected to change rooms except where they themselves have requested to move, or a temporary move is necessary to allow for repair or redecoration, or the move is part of a behaviour management plan following a risk assessment and agreed with the Council. |
| 6. Children are ready for transition. | The Services’ agreed contribution to the Pathway Plan is being achieved for each Child or young person as appropriate; Where arrangements have been made to facilitate further education or employment opportunities, staff support the Child or young person with any application processes and with the transition into further education or employment;Where a Child or young person leaves the Placement (i.e. To return placement or to move into independent living), arrangements are made to ensure their transition is successful by considering ongoing contact between the Child or young person and the Provider. Any arrangements are agreed with the Child’s social worker and the Child, and are reviewed via the statutory review processes to decide if contact is still required. |
| **Outcome: Enjoy and Achieve** |
| 1. Children attend, and are supported in, full time education. | There is a strong ethos, culture and high expectations regarding education attendance and positive engagement with educational activities and that an appropriate framework of expectations for behaviour, time keeping, peer group associations and school work is implemented;Staff always take an interest in Children’s school work, and encourage the completion of independent study/placement work;In partnership with the Council, Children who are out of school have access to alternative full-time provision which allows them to meet their potential, whilst working diligently and pro-actively to support the Child’s return to school at the earliest opportunity;There is an allocated member of staff for each Child, known to the Child, who liaises and works with schools to support Children to integrate within the education community;Each Child or young person is encouraged to be fully involved in their education planning including their PEP, their annual review and their transition plan;Suitable arrangements are made for Children travelling to and from their education provision including the provision of escorts where appropriate. |
| 2. Children are achieving their identified educational targets. | Children with poor school attendance and those who are at risk of exclusion, are actively supported to remain in education or training;All Staff support and encourage realistic targets of achievement;Where English is not a Child’s first language, there is help and support available for Children to learn English as their additional language. Additionally there is help available to retain/develop their first language within or outside of the Placement;Where appropriate, arrangements are made for Children to receive additional placement tuition to meet special needs, and to promote the Child or young person achieving their potential having regard to their particular aptitudes and interests. |
| 3. Children develop personally and socially. | That active encouragement and support is given for the participation of Children in a range of extra-curricular recreational activities, exercise, sport or play and that staff facilitate Children’s involvement in appropriate youth, community, educational and other group based activities.The active identification and deployment of resources for a diverse range of leisure activities, including some holiday provision and special outings during the school holidays;Where the Placement is in a rural location, that staff are deployed and transport is provided to ensure Children’s access to extra-curricular activities is not restricted by geography;That for all Placements planned to be over 38 weeks, Children are taken on an annual holiday that is equivalent to 14 days per year, and appropriate to their identified needs, at no additional cost to the Council;That such a holiday is taken outside of the school term, unless for exceptional reasons which should be referred to the officer with case management responsibility for written approval;That within the Placement, a range of age appropriate newspapers, books, magazines, toys, music and games are provided for Children’s use, having regard to Children’s interests and wishes. |
| 4. Children are happy and have pride in their achievements. | Have strategies in place to help Children to join in, try hard, and fulfil their potential and shall ensure that Children’s achievements are actively celebrated within the Placement |
| 5. Children have increased independence and self-reliance. | All staff encourage Children to understand how and where to find information and help in relation to independence |
| 6. Children know what their Placement Plan is, and are actively involved in their care planning/transition processes and decision making. | Every Child or young person has access to a copy of their Placement Plan, PEP and SEN in an appropriate format, having regard to any learning difficulty, disability or other special need;Every Child or young person has knowledge of their most recent Care Plan / Pathway Plan / Placement plan / Education Health and Care Plan (EHCP);Where a Child or young person is admitted in an emergency, the Placement Plan is developed in partnership with the Council and where appropriate the Child, within 3 working days;All staff encourage Children to express their views and make use of an advocate to enable them to influence decisions that affect their day to day lives;Every Child or young person has a recognized means of communication that is known to, and accessible to, all staff;Children are actively involved and their views are always taken fully into account in decision making and Children receive feedback and explanations so they know that their views and worries are listened to, acknowledged and appropriately responded to;Staff are competent and skilled to undertake effective consultation and communication with Children, their families and appropriate others;There are strategies in place to ensure each Child or young person participates in house meetings and can contribute to decisions about the planning and management of Services and activities;There is evidence of how Children’s views, feedback and evaluation of the Services have influenced the development and continuous improvement of the Services. |
| **Outcome: Make a positive contribution** |
| 1 Children know what their Placement Plan is, and are actively involved in their care planning/transition processes and decision making. | Every Child or young person has access to a copy of their Placement Plan, PEP and SEN in an appropriate format, having regard to any learning difficulty, disability or other special need;Every Child or young person has knowledge of their most recent Care Plan / Pathway Plan / Placement plan / Education Health and Care Plan (EHCP);Where a Child or young person is admitted in an emergency, the Placement Plan is developed in partnership with the Council and where appropriate the Child, within 3 working days;All staff encourage Children to express their views and make use of an advocate to enable them to influence decisions that affect their day to day lives;Every Child or young person has a recognized means of communication that is known to, and accessible to, all staff;Children are actively involved and their views are always taken fully into account in decision making and Children receive feedback and explanations so they know that their views and worries are listened to, acknowledged and appropriately responded to;Staff are competent and skilled to undertake effective consultation and communication with Children, their families and appropriate others as outlined in their care plan,;There are strategies in place to ensure each Child or young person participates in house meetings and can contribute to decisions about the planning and management of Services and activities;There is evidence of how Children’s views, feedback and evaluation of the Services has influenced the development and continuous improvement of the Services. |
| 2. Children have a range of age appropriate social, life, independent living skills and have an understanding of their rights and responsibilities. | There are opportunities and resources to assist Children in developing a range of social, life and independent living skills;Behaviour management practices place a primary emphasis on establishing positive relationships between staff and Children, and among the Children themselves;Where a Child or young person is living in a solo placement, that Child or young person has a range of opportunities to develop social skills and have experiences to avoid isolation and have increased interaction with peers and normal social living experiences;Where Children are living in single gender Placements, Children have a range of opportunities to engage with and develop a positive respect and regard for the opposite gender. |
| 3. Children have pride in their Placement environment. | The Placement is maintained to a high standard and staff maintain high expectations for the Placement in which Children live;Staff encourage Children to contribute to household chores as appropriate;Children are encouraged to take pride in their living accommodation and to take responsibility for keeping their Placement and Room clean and tidy;Staff encourage Children to have respect for their own belongings and the belongings of others. |
| 4. Children are good citizens, have a positive self-identity, mutual respect and empathy for the needs of others in and out of the Placement | There is an ethos, culture and practices for positive group living experiences based on social inclusion, empathy, mutual respect and acceptance;Children develop an understanding of environmental issues including care for the environment;There is an ethos, culture and practices for positive group living experiences based on social inclusion, empathy, mutual respect and acceptance;All staff encourage Children to present themselves positively in all settings and to behave in a socially acceptable manner outside the Placement;All staff encourage Children to take part in activities and leisure interests which reflect their interests and abilities;Staff have the range of skills, abilities and motivation to participate in a range of leisure pursuits with Children;It pro-actively promotes social inclusion and non-discriminatory behaviour and attitudes among all staff and Children;Birthdays, name days, cultural and religious festivals, as appropriate, are celebrated and Children are involved in the planning of such celebrations and the Provider allocates sufficient resources to do so;Staff encourage and support Children to be helpful people in their own way, and to be involved in community based activities, including helping to run activities where appropriate;Staff encourage, support and facilitate Children’s involvement in appropriate youth and community and educational activities with others. |
| 5. Children benefit from being with others and feel a sense of wider inclusion |
| 6. Children make a positive contribution to their community. |
| 7. Children are encouraged to have at least one friend | Actively promote the involvement of all Children in a social group in order to counteract isolation of the individuals by others and nurture friendships between Children and shall ensure that staff support those Children who for any reason do not readily fit into a group. |
| 8. Children are equipped to successfully deal with significant changes. | Staff are competent and skilled in supporting Children, parent(s) and carers through the placement process;Staff are competent and skilled to employ a range of strategies and mechanisms for supporting and educating Children to manage change and respond to challenges at different stages in their lives;Children know their rights, and are supported at key transition points in their lives, in partnership with other services as appropriate;Children are involved in the decision making about all placement moves and significant changes to their Care Plan;Children are encouraged and supported to keep in touch with the Placement after they have left, wherever appropriate, particularly when Children have left the Placement to live independently as a young adult |
| 9. Children are not offending, or there has been a reduction in their offending behaviour since their previous statutory review. | Staff, in partnership with other services and professionals, give guidance and support to prevent/reduce offending behaviour and its consequences;Resources are made available that support constructive and meaningful activity to engage Children and prevent their potential involvement in anti-social and/or offending behaviour;Children, who, through risk assessment and/or a court process have been identified as having high risk potential towards others, engage in appropriate treatment within or outside of the Placement. Where the Placement is caring for such Children, the Provider shall also ensure that the Placement contributes to the multi-agency public protection arrangements (MAPPA) where these apply. |
| **Outcome: Economic Well-being** |
| 1 Children feel positive about their future, and have ambition and aspirations with regard to where they want to be in life | Staff identify with Children what they are good at, and what they like to do and encourage development in those areas. Staff encourage each Child or young person to have ambitions about the life they wish to lead, and encourage them to think carefully about the choices they make now which will affect their quality of life. Staff support and explore positive and empowering opportunities and ways of achieving such ambitions including supporting the Children to challenge discrimination against them because they have been in care;Staff encourage and support Children to remain in education or training after statutory school leaving age and support them where this option is chosen;Staff encourage and support Children to engage in activities that help them to get work experience, learn work routines and build up a CV for later on in life. Staff also support Children with seeking employment, writing applications and preparing for interviews;Good links are forged with further education establishments, careers advisors and where possible mentoring schemes |
| 2 Children take up post-school training/employment opportunities. |
| 3. Children can manage their own finances safely and responsibly. | Each Child or young person has access to appropriate and reasonable resources to enable them to participate effectively in economic life (i.e. Transport/bus pass, weekly allowance and welfare benefits);Staff encourage Children to develop positive attitudes towards achieving their own economic wellbeing. Staff will coach Children in developing a responsible approach to managing money so they appreciate the value of money and the benefits of saving;Staff encourage Children to manage their own finances through help with budgeting, saving and banking and staff ensure Children are given as much freedom as possible in making decisions about spending their own pocket money, allowances or earnings;Each Child or young person is offered a lockable facility for the safekeeping of money, personal papers and valuables.From the effective date of 01st February 2019 the Council has maintained savings accounts for Children and Young People and save directly into these, releasing the money at age 18 or before if they leave care.  |

| **Part 2: Additional Outcomes for Placements with Education - the Service Provider must ensure that** |
| --- |
| **Outcome: Be Healthy** |
| 1. Children understand and practice a healthy lifestyle | The school’s personal, social, health and citizenship education (phse) curriculum promotes good health and a healthy lifestyle;The phse curriculum covers substance misuse, (including alcohol), sexual health and relationships and healthy eating/exercise;There is involvement of local agencies including the local health agencies and professionals, such as the drugs and alcohol action team (DAAT), in the delivery of the phse curriculum as appropriate;The curriculum offers all children access to physical activity at least twice a week;Staff are competent and skilled to be alert and responsive to children’s emotional well-being, including early indications of mental health needs, and staff are skilled and competent to support children, and access additional help if required;All staff are competent and skilled to identify and respond to early signs of visual or hearing impairment and other health issues, and discuss these with the child’s carers and social worker;There is an operational no-smoking policy for staff on duty whether on or off site with children, and as a general rule a no-smoking policy for children;Drinking water is available in the school, meals and snack menus reflect healthy living and children have opportunities to engage in food preparation as part of the curriculum;There are appropriate opportunities for participation in relaxation and recreational activities built into the school day;Children understand the importance of immunisations. |
| **Outcome: Be Safe** |
| 1. Children are safe and feel safe within the school environment. | There are written safeguarding policies and procedures which are understood and acted upon by all staff, and are compliant with the local safeguarding children’s boards’ inter-agency procedures;Staff training and practices explicitly address how the most vulnerable of children are to be safeguarded from abuse, and how indications of abuse can be identified and acted upon;Individual Behaviour Support Plan (IBSP) (including risk assessments and risk management strategies) are in place for each individual Child or young person and IBSP identifies the most effective de-escalation strategies to calm down situations that may lead to the need for physical interventions, as well as identifying works to be undertaken to equip children with positive ways of managing their anger and anxiety to prevent it from leading to high risk behaviours;There are written procedures for monitoring and evaluating significant incidents involving children, and the effectiveness of the school’s behaviour management policy;Staff training and practices explicitly address how children are to be safeguarded from unnecessary restraint; All staff are trained in positive behaviour management techniques including approved physical intervention techniques and only staff who have completed such training are involved in physical interventions;The school has a critical incidents plan and procedure and all staff are trained to exercise this in the case of an emergency or critical incident;There exists a strong culture in the school that bullying and discriminatory behaviour is not tolerated and that this culture is supported by rigorous policies and procedures that counter bullying and discriminatory attitudes and behaviour from staff, children and visitors;There are systems in place to protect children from the risks of internet sites e.g. Chat rooms, mobile phones, inappropriate/unwanted photography and filming and staff take steps to ensure children are well informed of the risks and how to protect themselves from potential risks.There are policies and procedures regarding safe internet access and there is provision for the application of safeguards and filters to govern safe internet access;There are systems in place to regularly canvas children’s views and feelings. |
| **Outcome: Enjoy and Achieve**  |
| 1. Children have good learning experiences matched to their assessed needs | Only qualified teaching staff who meet professional standards are employed;There are performance management review procedures for all teaching staff, and provision is made for all staff to be involved in training and continuous professional development and appraisal which includes targets for future performance;A suitably qualified, registered, and competent teacher is employed to exercise management oversight for all teaching staff working directly with Children;Baseline assessments are made using data from previous school/statement and new assessments made on arrival (including social and emotional needs);National curriculum levels/’P’ scale levels are:* Recorded at the end of each unit of work;
* Included in the report for LAC review;
* Included in the annual review report (for Children with statements);
* Included in the Child’s transition plan as applicable.

Each Child or young person has a PEP/IEP/IBP and transition plan, as applicable, with targets and these are updated;Arrangements are in place to ensure short and medium term lesson planning is monitored at least termly;Lesson observation systems are in place to monitor the quality of teaching and learning at least termly;The planning and delivery of the curriculum encompasses different teaching styles and techniques and responds to the age, aptitude, ability and learning style of the pupils;The Provider makes provision for a range of multi-media resources which will support the delivery of the curriculum in a way that encompasses the need for different learning styles;There are high expectations of all Children and plans are made having regard for individual abilities, aptitudes and interests, to support progression and attain demonstrable improvement in individual Children’s achievement in line with the average for the comparable population of children in England. |
| 2. Children are adequately prepared for the opportunities, responsibilities and experiences of adult life. |
| 3. Children attend school full-time. | Children with poor school attendance and those who are at risk of exclusion are actively supported to remain in education or training and increase their attendance;That links are maintained with mainstream education settings with the aspiration that Children will move into these settings;That Children are able to show improvement in the levels of individual attendance and active participation in their learning;School and residential staff are actively involved in planning and integrating the Child’s life with school;The school staff make representation on behalf of Children at their meetings including annual reviews and transition planning meetings;The school staff always invites residential staff to attend all school meetings and other events. |
| 4. Children are competent and confident in electronic communication techniques. | The use of ICT is integral to planning and delivery of the curriculum. |
| 5. Children are achieving their identified individual educational targets; | There are high expectations for each Child or young person to achieve individual stretching and challenging targets, and that the Child or young person has pride in their achievements;Children have access to SATS appropriate accredited awards including the opportunity to access at least 5 GCSE’s or equivalent, 2 of which should include Maths and English;Where English is not a Child’s first language, there is help and support available for Children to learn English as their additional language and additionally there is help available to retain/develop their first language either inside or outside of the School;Children’s achievements and attainments are celebrated;There are agreed systems for recording all educational achievements (e.g. Display boards, mention books and ‘golden’ awards). |
| 6. Children have pride in their achievements |
| **Outcome: Make a positive contribution** |
| 1. Children know what their PEP, IEP, IBP, annual review and transition plan targets are, and are actively involved in their education planning and transition processes and decision making; | Children are actively involved in reviewing, decision making and developing the targets for their Personal Education Plan (PEP) , Individual Education Support Plan( IESP), IBPS, annual reviews and transition plans and that work is done in advance of meetings if necessary to enable the Child or young person to participate;There is a school Council or other mechanism for Children to be involved in decision making about school activities and school life. |
| 2. Children’s views inform decision making in the School community. |
| 3. Children are good citizens, have positive self-identity, mutual respect and empathy for the needs of others in and out of the School. | There exist planned opportunities to develop a range of secure and positive relationships with adults and other Children;There exists mentoring and additional support for Children having difficulties forming/maintaining positive relationships with others;Children are helped to acquire the knowledge and understanding to become informed and responsible citizens;Children are participating and initiating activities in their school, community and the wider international community. |
| 4. That Children are equipped to successfully deal with significant changes in their lives. | Staff are competent and skilled in supporting Children, parent(s) and carers through the induction and leaving processes;Staff are competent and skilled to employ a range of strategies and mechanisms for supporting and educating Children to manage change and respond to challenges at different stages in their lives;Children know their rights, and are supported at key transition points in their lives, in partnership with other services as appropriate. |
| 5. Children are not offending or there has been a reduction in their offending behaviour since their previous statutory review. | All staff are trained and skilled to ensure early identification and intervention with Children at risk from anti-social behaviour;The staff, in partnership with other services and professionals, give guidance and support to Children to prevent/reduce offending behaviour and its consequences;There is evidence of restorative approaches such as conflict resolution and mediation. |
| **Economic Well Being**  |
| 1. Children are ready for working life. | Opportunities exist for all Children to learn about a range of different professions and occupations;Opportunities exist for all Children to receive independent professional advice from career education specialists;Opportunities exist for all Children to engage in work related experience and preparation for transition. |

#### 12.6 Welcoming the Child or Young Person

12.6.1 The Service Provider shall ensure the Registered Manager and/or Allocated Key Worker is present to welcome the Child or Young Person and settle them at the time that they move into the Residential Placement.

12.6.2 During the course of the introductory visits, the Service Provider will familiarise the Child or Young person with the Residential Placement, and where applicable the School, their own personal space within it, the communal areas and surrounding community. They should also be introduced to all staff and other children living at the residential placement.

12.6.3 Throughout the introductory visits and initial phase of residence after admission, the Service Provider must monitor the Child or Young Person’s adjustment to their new surroundings, including their relationship with other children, young people and staff, the Residential Placement, and where applicable, the School’s achievement in meeting the Child or Young Person’s individual needs; and for children with special needs, the need for adjustments in the use of any equipment.

#### 12.7 Authorised Absence

12.7.1 Young People may request to stay away from the Placement from time to time. The Service Provider will discuss this request at least 24 hours in advance of the absence with the Allocated Social Worker and the absence will not be permitted to take place until authorisation has been agreed by the Allocated Social Worker.

12.7.2 The Service Provider will record details of the absence and will be recorded on the young person’s file.

12.7.3 In the event of the young person not returning at the agreed time the Service Provider will follow the procedure set out at Section 4.2: Missing Episodes and Unauthorised Absences.

12.7.4 During an Authorised Absence, the Service Provider shall undertake regular checks to each Child or Young person to ensure they are safe and well. These checks should take place approximately every 3 hours though this frequency should be increased or decreased, subject to the risk assessment. Should a Young Person text in to the Service Provider, this should be verified with a call back to ensure that the Young Person is not under any form of duress.

12.7.5 During an overnight Authorised Absence, the Provider should check-in at 10pm and then the following morning at 9am.

#### 12.8 Interpretation and Translation

12.8.1 The Service Provider will supply Children and Young People who have English as an additional language with suitable interpreters. The costs of translation and interpretation will be reimbursed as follows:

|  |  |
| --- | --- |
| **Reason for Translation / Interpretation** | **Funded By** |
| Interventions and assessments in respect of immigration. | The Home Office and/or Thurrock Council |
| All visits by Children’s Service | Thurrock Council |
| All other circumstances | The Service Provider (within the weekly fee) |

#### 12.9 Regular Reporting

12.9.1 The Service Provider will produce a (typed) report at the end of every calendar month of the Placement. This report will be securely sent to the Allocated Social Worker in accordance Section 7.4: Data Protection and Processing. The report shall contain the following details:

|  |  |
| --- | --- |
| * Support provided. This should detail the number of hours support in each area, the desired outcomes, and progress within each outcome, with any challenges that were faced in the delivery of this
* Details of authorised and unauthorised absences (in summary) as these will have been reportable at the time – including of who the Child or young person was with and where
* Details of any missing episodes (in summary) as these will have been reportable at the time - including details of where and who the Child or young person was with if known.
* Details of incidents that involved verbal and/or physical aggression perpetrated by the Child or young person or where they were the target of this by another Child or Young Person. This includes incidents within and outside the Placement setting (in summary as these will have been reported at the time)
 | * Summary of the Child or Young Person’s emotional wellbeing and mental health throughout the month
* Details of any appointments in respect of immigration, whether this be with the Home Office or solicitors
* Details of any risks or concerns
* Details of any significant change in mood of the Child or Young Person
* Details of any accidents
* Details of any medical issues other than a common cold, whether or not this required hospital attendance or a visit to a GP (in summary) as this would have been reported at the time
* Details of any self-harm (in summary) as this would have been reported at the time
 |

### 13. ACCOMMODATION

#### 13.1 Risk Assessments

13.1.1 The Service Provider will submit a risk assessment for each property before a Referral can be made, including an analysis of risks and crime data from the national police website. The suitability of each placement will be judged by the council, with the final decision resting with the council as to the suitability, safety and risks in each area. It is expected that Children and Young People will not be placed in areas with known high risks from exploitation (sexual and other), gangs, drugs and crime and any other inherent risks.

13.1.2 The Service Provider shall note the following guidance from the National Crime Agency regarding County Lines, Gangs and Safeguarding when undertaking these risk assessments

 <https://www.nationalcrimeagency.gov.uk/what-we-do/crime-threats/drug-trafficking/county-lines>

#### 13.2 Accommodation Overview

13.2.1 The standards for accommodation for Residential Homes are regulated by the Residential Homes National Minimum Standards. The standards require a suitable physical environment with facilities fit for the purpose of accommodating Children and Young People.

13.2.2 Children and Young People must live in a well-designed, safe and pleasant home, with adequate space, in a suitable location where there is access to the necessary facilities for a range of activities. There should be facilities and play materials for children of all ages.

13.2.3 Placements must be situated in a location that supports its aims and objectives. This includes access to external services, education and health facilities and recreational activities.

13.2.4 Placements must provide a comfortable and homely environment and be well maintained and decorated. Avoidable hazards should be removed as is consistent with a domestic setting ensuring that risk reduction does not lead to an institutional feel.

13.2.5 Placements must also provide access to outside areas, where possible, or access to play space that is appropriate for the age of the children.

13.2.6 Each Child or Young Person will have their own key for the door to their accommodation and a safe in which to keep their valuables.

13.2.7 The Service Provider must also ensure there is a range of comfortable and fully accessible shared spaces, including for receiving visitors, in those centres which do not operate with fully self-contained flats.

13.2.8 Where Placements are offered for disabled children, the accommodation provided must be suitable to the specific needs which may include suitable aids, adaptations and other suitable equipment.

13.2.9 The Service Provider must develop, maintain and test an emergency escape plan for each Placement that all staff, Children and Young People are familiar with and have practised so they are clear what to do in an emergency.

13.1.10 Appendix 6: Property Standards sets out the Council’s detailed expectations around accommodation provision, room sizes, availability and furnishings; however the Service Provider should use reasonable judgment with regard to the adjusting this dependent on the child/young person to be accommodated.

#### 13.3 Electrical, Gas and other Equipment

13.3.1 The Service Provider shall ensure that all fixed and portable electrical and gas items that are used in Placements are purchased from new, meet the relevant British standards and are maintained in accordance with manufacturers recommendations and best industry practice, specifically with regard to Domestic Gas and Electrical safety checks and certification.

13.3.2 The Council’s requirements for equipment testing and maintenance are set out in Appendix 7: Property and Equipment Maintenance.

#### 13.4 Repairs and Maintenance

13.4.1 The Service Provider shall maintain a schedule of cyclical and responsive repairs at each Placement to ensure the building and facilities are maintained to a high quality and safe standard.

13.4.2 In addition to regular maintenance – e.g. Gas servicing – the Service Provider shall carry out a repairs inspection every 3 months to identify work that is required.

13.4.3 Unplanned (responsive) repairs that are identified should be undertaken in line with the timescales set out in the table below and not wait until the 3 monthly inspections. Competent contractors should be used with the appropriate registrations and qualifications. Records should be kept for inspection by the Council.

| **Situation** | **Detail** | **Response Time** |
| --- | --- | --- |
| Emergency | Where life may be at risk – eg. Gas leak, electrical power failure | Within 1 hour to make safe, to be completed within 24 hours – consideration should be given as to the safety of the family remaining at the Placement *-* the Council should be made aware immediately |
| Urgent | Significant inconvenience, but no immediate danger to life – eg. no hot water | Within 3 working days - the Council should be made aware within 3 hours |
| Semi urgent | Modest inconvenience where a repair is necessary but there is no danger – eg. Failure of one (where there are more than one) washing machine | Within 28 calendar days |
| Non urgent | Where a repair should take place but this is more for aesthetic reasons – these are likely to be decorating repairs | Within 2 months |

#### 13.5 Health and Safety

13.5.1 The Service Provider shall maintain an accident book held at each Placement. Details of accidents shall be recorded as soon as practical after the event.

13.5.2 The Service Provider must ensure that at all times on site there is at least one staff member who is first aid trained with up to date qualification. A list of the first aider for each day should be noted on noticeboards and at least one fully equipped first aid kit must be available and in-date at each Placement.

13.5.3 All staff must be briefed on health and safety at work, following the guidance from the Health and Safety Executive at the following link: [www.hse.gov.uk](http://www.hse.gov.uk) paying specific regard to the following risks:

|  |  |
| --- | --- |
| CleaningSlips and TripsFire SafetyViolence in the Workplace | Moving and handlingSharpsRIDDOR |

13.5.4 The Service Provider shall take all measures necessary to comply with the requirement of the Health and Safety at Work Act 1974, subsequent amendments and new legislation, and any other acts, orders, regulations and codes of practice relating to health and safety, which may apply to staff in the performance of their work

13.5.5 The Service Provider shall comply with all relevant legislation relating to its staff however employed including (but not limited to) compliance with the law relating to the entitlement of its staff to work in the United Kingdom

13.5.6 If the Service Provider has a reportable incident as defined by the Health and safety Executive (HSE) – see link - <http://www.hse.gov.uk/riddor/examples-reportable-incidents.htm> this will be notified to the appropriate body within 10 days of the incident as per HSE guidance or any subsequent changes to HSE guidance on these timescales

13.5.7 The appropriate body may be either the Council’s Health and Safety Team or the HSE – see link - <http://www.hse.gov.uk/contact/authority.htm>

13.5.8 Following notification to the appropriate body the responsible Council Commissioner for the service will also be notified within the same timescales as stated in 13.5.6

### 14. PERFORMANCE MANAGEMENT

#### 14.1 Contract Management and Monitoring

14.1.1 The Council will undertake regular monitoring reviews at least annually and as often as monthly or quarterly depending on the level of risk. New Service Providers will be subject to more frequent reviews during the first year. These reviews will take place over one day for a single Placement, with additional half days visits to second and subsequentPlacements.

14.1.2 Any specific item listed for monitoring as part of this Section 14: is indicative and does not prohibit the Council undertaking a full audit of performance against the requirements set out in the entire Specification using the methodology of their choice. Whichever monitoring processes are engaged by the Council, the Council will evaluate and translate the evidence from all categories and process to give a robust overview of performance to determine the effectiveness of the Service overall.

14.1.3 When monitoring is undertaken, the Service Provider and Council will agree the period for which performance is being evaluated, and the number of Children and Young People in the cohort for whom data is being collated and evaluated so as to demonstrate the relative value of any statistical return.

14.1.4 In the periods between reviews the Council will obtain feedback from Allocated Social Workers and Independent Reviewing Officers (IROs) on the achievement of outcomes. This will feed into the review with any quality issues being picked up with the Service Provider*.*

14.1.5 The Council may request copies of insurance certificates, gas and electrical safety certificates. Copies of policies may be requested between reviews and the Service Provider will supply updated copies as they are renewed including in response to changes in legislation.

14.1.6 The Service Provider will permit staff from the Council to inspect the Placements at any time, with or without notice. Council staff carrying out inspections will be suitably qualified and experienced, and will hold a satisfactory enhanced DBS check.

14.1.7 A Child or Young Person’s normal day will not be disrupted as a result of any visit or be asked to miss school or other planned activity in order to facilitate the visit. The Council will aim to fit in with the normal routine of the placement.

14.1.8 The Service Provider will register with the CCRAG (Children’s Cross Regional Arrangements Group) in order for the council to share monitoring reports for providers with other Local Authorities.

14.1.9 Monitoring and evaluation procedures may also take into account either as a desktop plan or site visit process:

* Evidence of how the Provider is meeting the local authority LAC Care Plan, IEP and/or PEP, and the Individual Placement Agreement for each Child or young person placed:
* Information from social workers, educational psychologists and other Stakeholders in respect of individual Children placed in the Placement and School as appropriate;
* Information from independent visitors and advocates:
* Information from the statutory review processes including the LAC Review, PEP and SEN reviews;
* Information from the relevant Regulatory Body including any reports that they publish along with any action plans submitted by the Provider in response to requirements or recommendations made by the relevant Regulatory Body;
* Financial information relating to the Provider and their ongoing financial viability;
* Feedback to the Council from the Children who are seen either individually and/or with others, and their parent(s) as appropriate;
* Information obtained from other placing authorities and other professional bodies or agencies including safeguarding investigations and serious case reviews;
* Results of any specific investigation relating to the Placement or School by any statutory body.
* Sources of evidence will include access to all statutory records and any other records including policies and procedures maintained pertaining to the running of the Placement/School and Children placed.

#### 14.2 Site Visits

14.2.1 Monitoring visits to the Placement location (a “Site Visit”) will involve the following aspects:

*For All Placements*

* Inspection of the premises, facilities and resources available to the Children and Young People, and to the staff to fulfil their roles
* Inspection of the placement’s policies and procedures
* Inspection of the records kept in the Placement in accordance with the General Data Protection Regulations and Caldicott Principles
* Interviews with the Children and Young People, Registered Manager and Staff, and any professional person visiting a Child or young person in the Placement at the time of visit,
* Observation of care practices

*For Placements with Education:*

* Inspection of the premises, facilities and resources available to the Children and to the Staff to fulfil their roles and deliver the curriculum
* Inspection of the School’s policies and procedures
* Inspection of the records kept in the School in accordance with the General Data Protection Regulations and Caldicott principles
* Interviews with the Children and Young People, Head Teacher and Staff, and any professional person visiting a Child or Young Person in the School at the time of visit
* Observation of teaching and pastoral care practices

 Further details are set out in Appendix 2a: Site Visits and Appendix 2b: Qualitative Feedback: Views of Children and Young People, and Stakeholders.

14.2.2 The Council will respect the privacy of the Child or Young Person in their Placement and their right not to engage in the review process

#### 14.3 Financial Viability

14.3.1 The Council will carry out due diligence on the financial standing of the Service Provider prior to approval and acceptance onto the Rolling Select List, and at least annually thereafter, dependent on risk.

14.3.2 If a Service Provider is operating as a sole trader or other entity where financial accounts are not publically available, as is the case with limited companies, information will be made available by the Service Provider to the Council. This may include sight of profit and loss statements and balance sheets, as well provision of personal reference information, such as a business bank manager – as may be requested.

14.3.3 The Service Provider shall report to the Council any significant adverse changes in their financial position should be reported within 7 working days, and in the case of imminent insolvency or administration, this must be reported immediately

14.3.4 Should there be any county court judgements (CCJ’s) against a Service Provider or its directors/partners or sole traders, or if a director is disqualified the Council shall be notified immediately.

14.3.5 Should the Service Provider’s directors register as a director of a new company at any point during the term of the contract, the Service Provider shall declare these directorships to the Council within 14 working days.

14.3.6 The Service Provider must implement and maintain levels of insurance cover as follows:

| **Insurance Type** | **Cover to Include** **(Specific Items)** | **Value** |
| --- | --- | --- |
| Public Liability | Sexual abuse and molestation liability cover to cover proven bodily or mental injury, disease, suffering or death of a child following sexual abuse Medical malpractice liability cover to cover proven bodily or mental injury following the maladministration to the child  | £10,000,000£1,000,000 per incident£1,000,000 per incident |
| Employers Liability |  | £5,000,000 |
| Professional Indemnity |  | £2,000,000 |
| Buildings Insurance | Including accidental and malicious damage | Rebuild cost |
| Contents Insurance | Including accidental and malicious damage | Replacement costs based for all fixtures and fittings and £1,500 per Child or Young Person |

14.3.7 The Service Provider will supply copies of certificates to the Council. The Council will not accept any liability for insurance claims.

#### 14.4 Key Performance Indicators

14.4.1 The Service Provider shall provide data to evidence their performance against the Key Performance Indicators set out in Appendix 1. These KPIs are set for the first year of the contract and will be used by the Council in monitoring the Service Provider’s performance. KPI data shall be submitted to the Council to the schedule as set out in the “Reporting Frequency” column. The KPIs are set for the Contract Term but may be altered by the Council with notice to the Service Provider.

14.4.2 As standard, the Council will review both the performance against and the relevance of, the Key Performance Indicators on an annual basis and agree with the Service Provider any revisions of these in advance of the next contract year.

14.4.3 If a Key Performance Indicator is not met during the period of the assessment then the Council may require the Service Provider to put together an action plan to address the issues within a timescale to be defined by the Council.

14.4.4 If the Key Performance Indicator is still not met at the next Reporting Period, the Council reserves the right to terminate the contract in line with the contractual terms.

#### 14.5 Management Information

14.5.1 Additionally, the Service Provider shall supply data as requested by the Council’s Commissioner which will evidence further performance of service delivery. This data may not initially have a target figure, but may form part of the discussions and amendments to the list of Key Performance Indicators. Data required from the contract outset is listed at Appendix 2: Management Information.

#### 14.6 Performance Issues, Suspension and Termination of the Contract

14.6.1 The Council will raise performance issues with the Service Provider verbally in the first instance. Unless the matter is immediately urgent (ie. placing the Child or Young Person at risk) the Council will then follow up with detail in writing within 7 working days.

14.6.2 The Council will advise the Service Provider of the timescale for resolution of the performance issue.

14.6.3 In the event that the identified issues are not rectified within the timescale, the Council may exercise its right to suspend the Service Provider from receiving new placements until the identified issues are rectified.

14.6.4 During this time the Council will provide a final deadline for resolution of issues and increase checks on the Service Provider. Failure to comply with the final request for resolution may result in the Council terminating the Service Provider’s contract.

14.6.5 More serious breaches of the Contract and this Specification may result in the Council terminating the contract with immediate effect, with payment only being made up to the last date of each placement.

#### 14.7 Termination of Individual Placements

14.7.1 The Council has a duty to minimise the number of moves a Child or Young Person experiences and the disruption this causes. The robust referral process aims to secure the right placement the first time to avoid further movement and instability for the Child or Young Person, outside the terms of the Individual Placement Agreement. However, if it is clearly evident that the placement is not suitable and could not achieve the intended outcomes for the Child or Young Person, this must be determined and acted upon in the manner described in the contract.

14.7.2 Where it becomes necessary to move a Child or Young Person from a Residential Placement before the expiry of the notice period (terminating the individual placement), the Council will provide written notice and fund the notice periods set out in the table below.

|  |  |
| --- | --- |
| **Time in placement** | **Notice and Payment Period** |
| Less than 1 week | 1 day |
| Between 1 week and 1 month | 7 days |
| Over 1 month | 14 days |
| Young People turning 18 | 7 days |
| Where a Young Person is remanded in custody | Immediate(no further payment) |

14.7.3 The Council is not obliged to give a reason for termination of individual placements, however if the move is as a result of an issue at the Residential Placementthe Council will attempt to resolve any issues before making the decision to move the Child or Young Person.

14.7.4 In circumstances where a Service Provider considers they are unable to meet the needs of a Child or Young person, a discussion will take place with the Allocated Social Worker to try to ensure that the placement remains viable. If these discussions fail to resolve any issues the Service Provider may give 28 days’ notice to the Council to terminate the placement.

14.7.5 In the event that the Allocated Social Worker believes that the issue could have been resolved and the Placement retained, but the Service Provider continued to terminate the placement, the Council will consider this as an “Unjustified Termination”. Any occurrence of Unjustified Termination will be monitored by the Council and this may lead to the suspension of the Service Provider.

14.7.6 The Service Provider will retain duty of care for the Child or Young Person from the time they are collected or received by the Service Provider until the Child or Young Person is returned to the care of the Council or person with parental responsibility.

### 15. QUALITY ASSURANCE AND GOVERNANCE

#### 15.1 Service Provider’s Quality Assurance

15.1.1 The Service Providershould develop a quality assurance process that sets out how issues and complaints are raised and resolved and how lessons can be learnt from them, and the process of self-audit on a regular basis to identify areas of strength and those that need to be improved.

15.1.2 The quality assurance process will include the Service Provider ensuring that assessors are professionally supervised (in accordance with HCPC standards).

15.1.3 The Service Provider will carry out one self-audit exercise every 2 months, the results of which shall be recorded and provided to the Council. The Service Provider may choose the areas for self-audit; however the Council will monitor the suitability of these choices as part of the contract management process.

15.1.4 Should the Service Provider identify any significant development areas from the self- audit, these must be reported to the Council within 7 working days.

#### 15.2 Governance

15.2.1 The Service Provider will ensure that the following is in place:

* The individuals responsible for the governance of the Service “the Governance Structure” delivered by the Service Provider will be made up of individuals with a mix of skills and expertise. All members of the governance structure will be conversant and have a good understanding/experience of the Services that the Service Provider is delivering
* An outcomes focussed approach to Service delivery will be taken by the Governance Structure
* Staff at all levels will have a voice and presence on the Governance Structure and be consulted on decision making.

#### 15.3 Electronic Record Systems

15.3.1 The Service Provider will maintain an electronic recording system “the System” that documents all of the information below as a minimum, including the ability to provide the data required against Appendix 1: KPIs and Appendix 2: Management Information.

|  |
| --- |
| **Electronic Records** |
| * Name
* Gender
* Date of birth
* Nationality
* Ethnicity
* Religion
* Picture of the Child or Young Person
* Name of Key Contacts
* Address of parents
* Social worker details and contact
* Social worker visit dates
* Electronic attachment of care pathway plans, education plans etc.
* Start and end date of placement
 | * Daily logs of interaction
* Risk Assessments (Council and Service Provider)
* Support Plans
* Case notes
* Assessments
* Education and employment details
* Visitors log
* Incident logs
* Safeguarding alerts
* Disability/impairment/other health issues
* Medical registrations and appointments
* Financial log of money received for each CYP, expenditure
 |

15.3.2 The System needs to meet the requirements of the Council and shall be capable of recording dates for every interaction and producing a report of key areas in a chronological format i.e. details of visitors and dates.

15.3.3 Any other information that the Service Provider intends to collect in relation to this contract will be advised in writing to the Council and not collected until express written consent is obtained from the Council.

15.3.4 The System used will be hosted in the United Kingdom (UK) or on a fixed server maintained by the Service Provider. Any systems that operate outside of the UK in a ‘cloud’ based environment or any other environment where servers are not within the UK, shall only be permitted where the express written authority of the Council is sought and obtained, following due diligence by the Council.

15.3.5 The System and any associated hardware will follow these broad principles:

* Will only be accessible by authorised staff within the organisation
* Password protected where sensitive personal, identifiable information is held
* Passwords will not be shared
* Held on a fixed server (unless hosted elsewhere and not by the Provider) that is maintained in a room or building that can be locked when there is not a member of staff presence
* Fixed desktop PCs and laptops will be maintained in lockable room or building
* Portable media – e.g. Laptops/netbooks/tablets will not be removed from the Centre unless security can be reasonably guaranteed
* The Service Provider must implement secure Wi-Fi and not permit portable media to be used on any unsecured or public network within or outside of the office

15.3.6 The Service Provider shall not use CDs or DVDs or Memory Sticks to store sensitive, personal, identifiable information which will leave the office

#####  Paper Records

15.3.7 Paper records should not be used as a method of storage due to their vulnerabilities, unless there is no reasonable secure alternative.

15.3.8 Where it is necessary to store paper records, the Service Provider will ensure they will be secured in locked cupboards (with key control) and not left unattended

15.3.9 Paper documents should not be removed from the Placement unless absolutely critical, and in any case will not be left unattended anywhere in a vehicle.

#### 15.4 Required Records

15.4.1 The Provider will maintain a file for each Child or Young Person which will contain the following information:

| **Child or Young Person’s File** |
| --- |
| * Referral forms received from social care
* Risk assessments received from social care
* Pathway plans received from social care
* Risk assessments prepared by the Provider including Child Exploitation (CSE) and risk of missing episodes
* Support Plans prepared by the Placement setting
* Confirmation that the Child or young person has received an induction at the Placement setting
* Educational, employment and training details
* ‘Pen portrait’ of the Child or young person detailing their history, their needs, wishes and feelings and any other information that will assist staff to understand each Child or young person
* Details of support sessions provided to the Child or Young Person
* Monthly reports for each Child or young person detailing focussed outcomes for each month, progress and challenges
* Chronological summary of support delivered Chronological detail of all visitors to the Placement setting – detailing name, age, identification checked, dates and times
* Chronological detail of authorised visits overnight (away from the Placement setting) - including details of where the Child or young person stayed
* Chronological detail of unauthorised absences away from the Placement setting – including detail of where the Child or young person stayed
* Chronological detail of missing episodes – including dates, times, if whereabouts was known following the return of the Child or Young Person, details of any known persons that the Child or young person was with whilst missing, return home date and time. Details of support provided post-return to the Placement setting
 | * Chronological list of social work visits
* Financial transactions – details of personal allowances received, spent and summary of expenditure type
* Details of medical registrations
* NHS number
* National Insurance Number
* Details of immigration interviews with solicitors / Home Office
* Incident reports
* Accident reports
* Medication details – what type of medication, how much and how often this is to be taken – consent to hold medication
* Details of medical visits - GP, Dentist, Optician and any other routine or non-routine appointment
* Details of allergies
* Missing reports
* Photograph of the Child or young person to be provided to the police in the event of any missing episodes. This must be recent and updated annually or after any significant change in appearance
* Contact information for the Child or Young Person
* Contact information for the young person’s family – this should not be disclosed and any contact with the family will be via the allocated social worker
* Contact information for the allocated social worker and Independent Reviewing Officer (IRO)
* Any other pertinent correspondence
 |

15.4.2 The Service Provider will maintain files for each member of staff / volunteer with the following documentation:

|  |
| --- |
| **Staff Files** |
| * Application form
* Details of interview process and scoring with any relevant tests that were set
* Copies of identification
* Copies of educational / professional body certification
* Copies of training certificates
* DBS reference number and date last undertaken
 | * Contract of employment
* Details of induction undertaken
* Details of training undertaken / planned with the Service Provider with dates, levels and accrediting bodies
* Supervision notes
* Records of sickness, leave and disciplinary issues
 |

### 16. PRICE AND PAYMENT

#### 16.1 Fees

16.1.1 The Council will pay a weekly fee for the Service calculated which will be paid in arrears on the receipt of an invoice in a format to be agreed by the Council.

16.1.2 The Service Providershould sign up to the Council’s ‘iSupplier’ portal to upload invoices in arrears at the end of each month. The Council will pay invoices 10 days from receipt of a correct invoice if using the ‘iSupplier’ portal. The Service Provider shall note that payment arrangements may be subject to change by the Council, for which reasonable notice will be given.

16.1.3 These timescales may increase in the event of a disputed invoice. The Council will work with the Provider to resolve issues as quickly as possible. Invoices should be submitted in arrears within 7 days of the end of each calendar month.

16.1.4 Once a Young Person reaches age 16 the Local Authority may wish to permit an allowance to prepare for independent living and adulthood. The Service Provider will include for this allowance within the standard weekly fee payable.

16.1.5 Where a retainer fee is payable to keep a place open for a forthcoming placement (i.e. where a young person is coming out of secure accommodation or custody), the Council will pay this to the Service Provider at a maximum of 25% of the standard weekly fee.

16.1.6 The weekly fee will include all costs as listed in the table below, with no additional payments made by the Council regardless of additional need.

 The fee payable will include the following:

|  |  |
| --- | --- |
| * Accommodation costs (rental or mortgage)
* All support costs
* Ensuring that properties comply with all of the points set out in this specification
* Furnishings and replacing furnishings
* Decoration
* Clothing and school uniform
* Access to a computer for each Child or Young Person
* Sports / hobby equipment
* Pocket money, birthday, festival gifts
* Educational costs
* Holiday costs
* Contact costs
* Glasses / contact lenses
* Interpreting (see below)
* Repairs to the property including damage that has been caused
* All staffing costs
 | * Meetings with all agencies and services
* Mileage
* Transportation costs – staff
* Transportation costs – Children and Young People – to appointments, meetings, to receive support and attend education or employment (young people will only be responsible for funding their own recreational transport)
* Food / personal hygiene products for the child / young person, should personal allowance be expended and this would mean the young person being left without food / personal hygiene products
* Telephone calls from fixed lines (staff use and young person use should they not be able to use their mobile phone)
* Internet usage
* Utility costs
* All other costs associated with the delivery of the service detailed within this specification
 |

16.1.7 The fees payable and pricing structure are detailed within the tender documentation. A series of discounts will form part of the tender evaluation, in addition to the weekly fee.

### 17. SOCIAL VALUE

17.1 The Council has considered the implications of the Social Value Act 2012 within the remit of this Service. The Social Value Act requires public authorities to have due regard for economic, social and environmental wellbeing in connection with public service contracts.

17.2 The Council’s Social Value framework is set out here:

 <https://www.thurrock.gov.uk/council-procedures-and-thresholds/social-values>.

17.3 Therefore the Service Provider will deliver additional ‘added’ **social** value that benefits the community and the people who live within it.

17.4 As part of this contract the Service Provider will support local voluntary initiatives by promoting the engagement of Children and Young People in suitable voluntary activities in the community. These voluntary activities will be supported by staff volunteering alongside Young People.

17.5 The Service Provider will deliver at least 5 hours per month in Social Value activity while a Young Person is in the Placement. These 5 hours include the time for the young person and for the member of staff (i.e. 2.5 hours for each of them). Voluntary activities will be appropriate with suitable risk assessments being carried out before commencement.

17.6 In order to comply with the ethos of voluntary work (and UK immigration rules for unaccompanied asylum seeking children) the Service Provider must ensure that:

* There should be no payment, other than travel and meals (and should only be for expenditure incurred and not as an allowance)
* There should be no contractual obligations
* Volunteering is not a substitute for employment, that is fulfilling a role that a salaried worker would normally fill
* The volunteer is helping a registered voluntary or charitable organisation, an organisation that raises funds for either of these, or a public sector organisation

17.7 Bidders will make proposals around these as part of their tender submission and once agreed by the Council, will become a contractual obligation for the successful Service Provider.

### APPENDIX 1 – KEY PERFORMANCE INDICATORS

Key Performance Indicators will be reviewed annually. The 100% target relates to the low numbers of Children and Young People expected to be placed with each Service Provider.

Note that the reporting frequency in the table below will apply when placements are commissioned.

| **Outcome** | **Description** | **Calculation** | **KPI Target** | **Reporting Frequency** |
| --- | --- | --- | --- | --- |
| **ALL PLACEMENTS (WITH AND WITHOUT EDUCATION)** |
| **OUTCOME KPIS** |
| 1. Children and Young People are able to make appropriate attachments, develop resilience and experience emotional well-being.. | 1.1 Documented evidence that Children and Young People have contact with their family and friends in accordance with their care plan as a percentage.1.2 Percentage of Children and Young People who have an identified mental health plan that are receiving the support specified. | 1.1 Number of Children and Young People with documented evidence of contact with their family and friends in accordance with their care plan divided by all Children and Young People with a plan that includes contact with family and friends.1.2 Number of Children and Young People with a mental health plan that are receiving the support specified divided by all Children and Young People with a mental health plan. | 100%100% | Quarterly Reporting |
| 2. Children and Young People value the importance of their health and wellbeing and do not participate in harmful activities | 2.1 Percentage of Children and Young People who smoked on arrival at the placement who stopped smoking within three months2.2 Percentage of Children and Young People who smoke, or misuse alcohol or other substances that are accessing specialist support | 2.1 Number of Children and Young People smoking on arrival who stopped within three months divided by all Children and Young People smoking on arrival2.2 Number of Children and Young People who smoke, or misuse alcohol or other substances, who are accessing specialist support divided by all Children and Young People who smoke, or misuse alcohol or other substances | 100%100% | Quarterly Reporting |
| 2. Children and Young People value the importance of their health and wellbeing and do not participate in harmful activities | 2.3 No Children and Young People have started smoking or misusing alcohol or substances since living at the placement2.4 No incidents of substance misuse occur at the placement (or school where education is provided) | 2.3 Number of Children and Young People who have started smoking or misusing alcohol or substances since living at the placement2.4 Number of incidents of substance misuse occurring at placement or school where education is provided by the Service Provider | 0 (zero)0 (zero) | Quarterly Reporting |
| 3. Children and Young People know how to stay healthy through good diet and regular exercise | 3.1 Percentage of Children and Young People who (are able) take part in at least one physical activity/exercise/play activity outside of the school curriculum | 3.1 Number of Children and Young People who (are able) to take part in physical exercise outside of school curriculum do so at least twice per week divided by all Children and Young People able to take part in physical exercise. | 100% | Quarterly Reporting |
| 4. Children and Young People are safeguarded from bullying, self-harm, absconding, accident, injury, death etc. | 4.1 Percentage of Children and Young People with evidence of reduced absconding since living at the Placement.4.2 Percentage of Children and Young People whose self-harming has decreased since living at the Placement4.3 Number of recorded incidents or complaints about bullying 4.4 Number of Children and Young People reporting bullying at the Placement on two or more occasions4.5 Percentage of Children and Young People with up to date Risk Assessments in place.4.6 Percentage of Children and Young People identified at risk that have interventions in place. | 4.1 Number of Children and Young People with evidence of reduced absconding since living at the Placement divided by all Children and Young People who were absconding before arriving at the Placement,4.2 Number of Children and Young People whose self-harming has decreased since living at the Placement divided by all Children and Young People who were self harming before arriving at the Placement4.3 Number of recorded incidents or complaints about bullying.4.4 Number of Children and Young People reporting bullying at the Placement on two or more occasions4.5 Number of Children and Young People placed with a risk assessment in place divided by all Children and Young People placed.4.6 Percentage of Children and Young People identified at risk who have interventions in place divided by all Children and Young People identified as at risk. | 100%100%< 2 per annum0 (zero)100%100% | Quarterly Report |
| 5. Children and Young People are not restrained inappropriately | 5.1 No complaints by Children and Young People or other stakeholders about inappropriate use of restraint. | 5.1 Number of complaints by Children and Young People or other stakeholders about inappropriate use of restraint. | 0 (zero) | Quarterly Report |
| 6. Stability of placements | 6.1 Percentage of Placement Planning Meetings held within one working day of an incident that threatened placement stability6.2 Number of Placements that ended in an unplanned way – ie. not in accordance with the original IPA | 6.1 Number of Placement Planning Meetings held within one working day of an incident that threatened placement stability divided by the total number of relevant incidents6.2 Number of Placements that ended in an unplanned way – ie. not in accordance with the original IPA | 90%0 (zero) | Quarterly Reporting |
| 7, Children and Young People are ready for Transition | 7.1 Percentage of Children and Young People with a written pathway plan to move to a successive Placement | 7.1 Number of Children and Young People with a written pathway plan to move to a successive Placement divided by all Children and Young People moving to a successive Placement. | 100% | Quarterly Reporting |
| 8. Attendance and achievement at school | 8.1 Number of Children and Young People missing more than 25 days of schooling in a 12 month continuous placement8.2 Percentage of SEND Children and Young People aged 14+ with a transition plan8.3 Percentage of SEND Children and Young People who have an up-to-date review of their Education Health Care Plan (EHCP)8.4 Percentage of Children and Young People who have a registered full time education place. | 8.1 Number of Children and Young People missing more than 25 days of schooling in a 12 month continuous placement8.2 Number of SEND Children and Young People aged 14+ with a transition plan divided by all SEND Children and Young People aged 14+8.3 Number of SEND Children and Young People who have an up-to date review of their EHCP divided by all SEND Children and Young People8.4 Number of Children and Young People eligible to be in full time education that have a registered full time education place divided by all Children and Young People eligible to be in full time education | 0 (zero)100%100%100% | Quarterly Reporting |
| 9. Children and Young People develop personally and socially | 9.1 Number of days of holiday provided to Children and Young People in Placements lasting for 38 days or more  | 9.1 Number of days of holiday provided to Children and Young People in Placements lasting for 38 days or more | 14+ per annum | Quarterly Report |
| 10. Children and Young People have increased self-reliance and independence | 10.1 Percentage of Children and Young People over 16 who are engaged in employment, training or further education (EET) | 10.1 Number of Children and Young People over 16 who are EET divided by all Children and Young People over 16 | 100% | Quarterly Report |
| 11. Children and Young People are not offending or there has been a significant reduction in offending behaviour | 11.1 Number of Children and Young People given a final warning/reprimand or convicted of an offence taking place since residing at the Placement11.2 Number of incidents at the home requiring the Police to attend11.3 Number of first time offences committed by Children and Young People since living at the home11.4 Percentage of Children and Young People who have reduced their offending behaviour since arriving at the Placement | 11.1 Number of Children and Young People given a final warning/reprimand or convicted of an offence taking place since residing at the Placement11.2 Number of incidents at the home requiring the Police to attend11.3 Number of first time offences committed by Children and Young People since living at the home11.4 Number of Children and Young People who have reduced their offending behaviour since arriving at the Placement divided by all Children and Young People who arrived with offending behaviour | 0 (zero)0 (zero)0 (zero)100% | Quarterly Reporting |
| 13. Children and Young People are supported to maximise their health | 13.1 Percentage of Children and Young People taking prescribed medication in accordance with their prescriptions;13.2 Percentage of Children and Young People and young people who are registered with a doctor and have attended an initial consultation13.3 Percentage of Children and Young People and young people who are registered with a dentist and have attended an initial consultation;13.4 Percentage of Children and Young People and young people are registered with an optician and have attended an initial consultation13.5 Percentage of Children and Young People and young people who have up to date immunisations. | 13.1 Number of Children and Young People and young people taking prescribed medication in accordance with their prescriptions divided by all Children and Young People with prescribed medication.13.2 Number of Children and Young People who are registered with a doctor and have attended an initial consultation divided by all Children and Young People13.3 Number of Children and Young People who are registered with a dentist and have attended an initial consultation divided by all Children and Young People13.4 Number of Children and Young People who are registered with an optician and have attended an initial consultation divided by all Children and Young People13.5 Number of Children and Young People with up to date immunisations divided by all those eligible to receive the immunisations. | 100%100%100%100%100% | Quarterly Reporting |
| **TRAINING KPIS** |
| 14. All staff are trained according to the requirements of the specification | 14.1 Percentage of staff receiving an induction meeting the requirements in X.X within 2 weeks of employment start date.14.2 Percentage of staff completing the specific training programme set out for their role within four weeks of the planned completion date14.3 Percentage of staff completing annual update training appropriate for their role | 14.1 Number of staff receiving an induction meeting the requirements in 6.4 within 2 weeks of employment start date divided by all new staff14.2 Number of staff completing the specific training programme set out for their role within four weeks of the planned completion date divided by all staff with a training programme14.3 Number of staff completing annual update training appropriate for their role divided by all staff with programmed annual update training. | 100%100%100% | Six Monthly reportingSix Monthly reportingAnnual reporting |
| **ADDITIONAL KPIS FOR PLACEMENTS WITH EDUCATION** |
| 15. Children and Young People have good learning experiences matched to their assessed needs | 15.1 Percentage of School Staff who have had an annual appraisal or performance management review15.2 Percentage of Teachers achieving a minimum of 80% Good or Excellent against targets in their appraisal | 15.1 Number of School Staff receiving an annual appraisal or performance management review divided by all School Staff15.2 Number of Teachers achieving a minimum of 80% Good or Excellent against targets in their appraisal divided by all Teachers | 95%95% | Annual Reporting |
| 16. Children and Young People are achieving their identified individual achievement targets | 16.1 Percentage of Children and Young People taking SATs and/or at least one accredited examination16.2 Percentage of Children and Young People achieving national target levels at KS2, KS3 and KS416.3 Percentage of base line assessments completed within four (4) weeks of entry16.4 Percentage of Children and Young People making progress towards their targets that is:1. Satisfactory
2. Above satisfactory
 | 16.1 Number of Children and Young People taking SATs and/or at least one accredited examination divided by all Children and Young People of the relevant age/s16.2 Number of Children and Young People achieving national target levels at KS2, KS3 and KS4 divided by all Children and Young People of the relevant age/s | 100%100%100%a) 80%b) 20% | Annual ReportingQuarterlyAnnual ReportingQuarterly ReportingQuarterly Reporting |
| 16.3 Number of baseline assessments completed within four (4) weeks of entry divided by all baseline assessments required.16.4 Number of Children and Young People making progress towards their targets that is:1. Satisfactory
2. Above satisfactory

 divided by all Children and Young People |
| 17. Children and Young People are ready for working life | 17.1 Percentage of Children and Young People at KS4 who are involved in work related experience and/or mini enterprise | 17.1 Number of Children and Young People at KS4 involved in work related experience and/or mini enterprise divided by all Children and Young People at KS4 | 100% | Annual Reporting |
| 18. Effective behaviour management is in place | 18.1 Percentage of Children and Young People who are meeting the targeted reduction of anti-social behaviour following implementation of behaviour and anti-bullying/racist policies and practices. | 18.1 Number of Children and Young People meeting the targeted reduction of anti-social behaviour following implementation of behaviour and anti-bullying/racist policies and practices divided by all Children and Young People who have this as a relevant target | 100% | Quarterly |

### APPENDIX 2: PERFORMANCE MANAGEMENT INFORMATION

#### 2a Site Visits

As set out in Section X: Performance Management, the Council will monitor the performance of the Service Provider through a range of methods including a site visit at least once per annum.

The Council reserves the right to inspect any aspect of the Service during the Site Visit; however the list detailed below sets out the key aspects that will be monitored.

**All Placements**

1. Person specifications and job descriptions reflect the required characteristics of staff.
2. The Placement can demonstrate that knowledge and skills are being applied by its staff.
3. There is documented evidence that the Service Provider works in partnership with health services to deliver and achieve all treatment plans and goals.
4. There is documented evidence of the Service Provider working in partnership with Health and Education Services.
5. All staff are familiar with the local teenage pregnancy strategy
6. All Children and Young People have records which include up to date risk assessments and plans to manage risks;
7. All Children and Young People who are engaged in employment, training or work experience have records which include documentary evidence of risk assessment and appropriate insurance (unless School based);
8. All Children and Young People assessed as being at risk of sexual exploitation have planned interventions to reduce the risk;
9. The regulatory body’s most recent report confirms that the Placement is operating to provide good and safe care and is “Good” or “Outstanding”, and there is no enforcement action being taken;
10. The Placement has a conflict resolution strategy and Children and Young People were involved in its development and know what it is.
11. There is evidence that Children and Young People are receiving any statutory allowances to which they are entitled;
12. There is evidence within the Placement of all Children and Young People’s achievements including photos and certificates.
13. A range of materials, resources and local contacts is available to staff and Children and Young People to promote independence skills and citizenship;
14. Protocols exist in the Statement of Purpose and procedures to facilitate safe and planned contact with Home leavers.
15. There is a ‘sanctions and rewards’ book which shows the actions of all Children and Young People to mitigate damage.
16. All staff are aware of their responsibilities in designated aspects of health and safety;
17. All staff are aware of the anti-bullying and anti - racism policy and procedures to deal effectively with incidents;
18. Staff are aware of policy and procedures regarding the use of the internet, mobile phones and game consoles
19. Children and Young People have an up-to-date manual handling plan, where applicable.

**ADDITIONAL INSPECTION ITEMS FOR PLACEMENTS WITH EDUCATION**

1. Staff are able to carry out the critical incidents plan.
2. Lessons observed are good or better and provide effective teaching and learning opportunities, incorporating the use of specialist approaches where required;
3. Staff have a portfolio evidencing continuous professional development.
4. There is evidence of access to written and multi-media resources that are appropriate to the age, ability and interests of the Children and Young People being educated.
5. All PEPs and IEPs are updated to show assessed levels in core subjects and progress since entry/last report/last review (target 100% within half term every six (6) to seven (7) weeks
6. Children and Young People are receiving agreed recognition and rewards for achievement and attainment

#### 2b Qualitative Feedback: Views of Children and Young People, and Stakeholders

The following sample questions represent those performance indicators which will be evidenced through qualitative feedback attained through Children and Young People’s participation as well as consultation with the other Stakeholders which may include each Child’s parent(s)/carers as appropriate, their located key worker, social worker, educational psychologist or other professional.

Participation may include face to face interviews, written questionnaires and other mechanisms. The Council will advise the Provider how they will seek feedback from Children and Young People and other Stakeholders. The Provider will co-operate with any reasonable request by the Council to facilitate Children and Young People’s participation.

Specifically with regard to stakeholder feedback, the Council will regularly liaise with stakeholders to review the achievement of the outcomes set out in the specification.

The questions are intended to be a guide to the Service Provider, not an exhaustive list – and does not preclude the Council asking for feedback on any aspect of the Service.

**FEEDBACK FROM CHILDREN AND YOUNG PEOPLE AND YOUNG PEOPLE - ALL PLACEMENTS**

*Your Rights*

1. Do you know how to access advocacy services and/or speak with Children and Young People’s rights officers, contact solicitors and use complaint procedures both within and outside of the placement?
2. Have you been given a copy of your “Placement Plan”?
3. Do you understand your “Placement Plan”?
4. Have you been involved in developing your “Placement Plan”?

*Health and Feeling Safe*

1. Do you feel that staff comply with the no smoking policy?
2. Do you receive information about the risks of harmful activities – such as smoking, or misuse of alcohol or other substances?
3. If you do smoke or misuse alcohol/drugs are you receiving support to help you stop?
4. Do staff support you to attend health checks and engage in necessary treatment?
5. Has your confidence and independence improved since you moved to the placement?
6. Are you able to participate in, and experience activities in line with your interests and wishes?
7. Have you received good information, advice and support in issues of sex education and sexual relationships, both in and outside of the placement?
8. Are your dietary and cultural requirements and food choices met?
9. Do you think you are able to eat a healthy, balanced and nutritious diet at the placement?
10. Are you involved in menu planning and food preparation?
11. Do you feel safe at the placement?
12. Do you think staff treat you fairly and you can freely raise concerns with them or another adult at the placement?
13. Are you sure that that staff do not tolerate bullying and discriminatory behaviour at the placement?
14. If there was an incident of bullying, would these be taken seriously and effectively dealt with by the staff?
15. Do you think that decisions are made jointly and fairly and your point of view is listened to and taken into account?
16. Do you feel that any sanctions or consequences are fair and adequately explained;
17. Do you feel your individuality is respected, positively promoted and reflected?
18. Are you informed about risks inside and outside of the placement, and there are systems in place to keep you safe?
19. Do you feel that staff act positively to calm down difficult situations and only use physical restraint as a last resort?
20. If you have been physically restrained did you feel safe and were not hurt in the process?

*Living at the Placement*

1. Have you been encouraged to personalise your room to reflect your taste and interests?
2. Have you had the same room since moving to the placement?
3. If you have moved rooms, was this because you wanted to?
4. Are you supported and encouraged to complete tasks at your placement as well as personal study?
5. Do you think there are varied activities in school holidays including special outings?
6. Have you had a holiday (with the placement)?
7. Are there a good range of games, music, toys and reading material available to you?
8. Do staff regularly take part in appropriate activities with you?

*Support for School and Learning*

1. Can you name the staff member at the placement who liaises with your school and supports you with school matters?
2. If your first language is not English, do you receive effective help and support to learn English?
3. If your first language is not English, do you receive support to help you retain or develop this language?
4. Do you participate in extra-curricular activities of your choice?

*Becoming an Adult (Children and Young People aged 15 years and over)*

1. Do you have a named personal advisor and are you accessing careers advice?
2. Do you know if there is a mentoring scheme available for you and are you supported to access it?
3. Are you aware of independent support services, including leaving care groups run by and for Children and Young People in care?
4. Do you understand what voting rights you will have when you reach l8 in local and national elections and how to register to vote?
5. Do you know your rights and responsibilities in preparing for independent living?
6. Do you think your Care Plans/Pathway Plans will give you sufficient preparation for leaving care?
7. Do you know what you would like to do when you leave school and care
8. Are you are working towards achieving your ambitions for when you do leave school and care?

*Emotional Wellbeing*

1. Do you have at least one significant adult in whom you trust?
2. Do you feel that relationships within the Placement are based on respect and care?
3. Do you think that your achievements are openly celebrated within the placement?
4. Do staff promote social inclusion and anti-discriminatory behaviour and attitudes and that the placement feels inclusive and ‘safe’ for you?
5. Are celebrations which are important to you valued and celebrated within the placement?
6. Do you have positive and regular contact with at least one friend in or outside the placement; at least once a week;
7. Do you feel lonely or isolated from friendships?
8. Do you feel happy with the placement, even if you are not happy being away from your family?
9. Have staff helped you to cope better with challenges and changes in your lives?
10. Have staff helped you to maintain a relationship with an important person in your life?
11. Can you see your social worker and other involved professionals when you need to?
12. Do you have a positive view of your longer term future and are you encouraged to discuss and develop ambitions and aspirations with staff?

*Moving On (Exit Survey)*

1. Do you feel you have received enough support from the placement in your move?

**ADDITIONAL QUESTIONS FOR YOUNG PEOPLE IN PLACEMENTS WITH EDUCATION**

1. Does your School take bullying and racist incidents seriously?
2. If you have reported an incident of bullying and/or racism, has this been resolved to your satisfaction?
3. Do you feel safe at School?
4. Have you been taught how to keep yourself safe when using electronic communication/social media?
5. If you have one of the following, are you involved with reviewing this with the School, including setting new targets:

(i) PEP;

(ii) IESP;

(iii) IBSP

(iv) transition plans

(v) EHCP

1. Are you involved in School or Class Council and wider community activities?
2. Is there an ethos of mutual respect in the School?
3. Do you have access to a computer, internet and your own e-mail address in School?
4. Are you aware of, and involved in, your transition plan when joining and leaving the School?

#### 2c Management Information

Length of Service of current and previous Registered Manager

Turnover of Staff

Number of changes individual Children and Young People have experienced in their key worker

Breakdown of staff demographics (gender/ethnicity etc.)

Conception rates

Percentage of Children and Young People make use of visits to the Placement by any independent visitors and/ or advocates, excluding those Children and Young People who have clearly identified that they do not want to receive such a service

Number of notifiable accidents/injuries within the Placement

Number of racist incidents reported within the Placement

Number of incidents in the Placement as a result of unsafe activity, and/or contact via the internet or mobile phone

Number of incidents where Children and Young People have been physically restrained

Number of neighbourhood complaints and/or compliments

Number of school events (parent evenings/concerts/assemblies/sports days) have been attended by people with significant involvement in the Child’s life, including their parents.

### APPENDIX 3 – RELEVANT LEGISLATION

The legislation that is relevant to this contract is set out below. The Service Provider will adhere to all relevant legislation listed below, will ensure that its practices conform to this legislation, ensure that family assessors are familiar with the principles of each piece of legislation and will ensure that it keeps up-to-date with changes and revisions of this legislation:

* The Children and Young People Act 2004 (repealing and amending previous legislation), notably the Children and Young People Act 1989
* Protection of Children and Young People Act 1999
* Children and Young People and Social Work Act 2017
* Care Standards Act 2000
* The Disability and Equality Act 2010
* The Human Rights Act 1998
* Working Together to Safeguard Children 2015
* Statutory Guidance on Children who Run Away or go Missing from Home or Care 2014
* The Carers and Disabled Children Act 2000
* The Children (Leaving Care) Act 2000
* The Care Leavers (England) Regulations 2010
* The Care Planning, Placement and Case Review (England) Regulations 2010
* Children and Families Act 2014
* Safeguarding Vulnerable Groups Act 2006
* Management of Houses Multiple Occupation (England) Regulations 2006
* Health and Safety at Work Act 1974
* Equalities Act 2010
* General Data Protection Regulations 2016
* Freedom of Information Act 2000
* The UN convention on the rights of the child
* The Caldicott principles

### APPENDIX 4 – APPLICABLE STRATEGIES AND POLICIES

**1. Violence against Women and Girls (VAWG) Strategy:**

Violence Against Women and Girls (VAWG) undermines confidence, opportunity and ambition for victim-survivors, especially where it takes place during childhood or adolescence. It is not only implicated in ongoing gender inequality, meaning women and girls do not reach their potential, but also results in mistrust and isolation that undermines communities.

Providers shall both understand and ensure their Service acts appropriately against any act of VAWG, defined as follows:

**Home Office Definition:**

 any act of gender based violence that results in, or is likely to result in physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private.

**UN Definition**

Violence that is directed against a woman because she is a woman or that affects women disproportionately... The term “women” is used to cover females of all ages, including girls under the age of 18… manifested in a continuum of multiple, interrelated and sometimes recurring forms… physical, sexual and psychological/emotional violence and economic abuse and exploitation, experienced in a range of settings, from private to public, and in today’s globalised world, transcending national boundaries.

Female Genital Mutilation (FGM) should be reported to the appropriate services and staff trained in looking at the signs of FGM and reporting procedures in place. The reporting of FGM is now mandatory for health and social care professionals as detailed within the following guidance.

Service Provider staff shall be trained to understand and act on the signs of potential sexual abuse or domestic violence, both towards women and towards men. The following link has useful information:

 <http://www.nhs.uk/Livewell/abuse/Pages/signs-domestic-violence.aspx>

**2. Child Sexual Exploitation (CSE) Core Principles**

Service Providers will be conversant with CSE, its complexities, the warning signs and children’s vulnerabilities toward CSE. It is critical to both victim and public confidence that the response of partners is reflected accurately through operational activity, communications material and channels, and the media.

CSE is a form of abuse which involves children (male and female, of different ethnic origins and of different ages) receiving something in exchange for sexual activity. Perpetrators of CSE are found in all parts of the country, rural and urban areas and are not restricted to particular ethnic groups.

This definition is supported by a set of national key messages:

* CSE (aged 18 and under) involves situations, contexts and relationships where the Young Person receives ‘something’ (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts and/or money) as a result of them performing, and/or others performing on them, sexual activities.
* CSE can occur through the use of technology without the child’s immediate recognition; for example, being persuaded to post images on the internet / mobile phones without immediate payment or gain.

Further information and advice on CSE can be obtained from the Local Safeguarding Children Board (LSCB) <http://www.thurrocklscb.org.uk/>.

The NSPCC website gives a basic awareness around child sexual abuse and exploitation. All staff should be versed in order to have a reasonable level of understanding if not already obtained.

<http://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/child-sexual-abuse/what-is-csa/#tab-3a4631c0-8b39f8d0>

All staff should be versed on teenage relationship abuse at a basic level in order to gain a reasonable level of understanding. <http://thisisabuse.direct.gov.uk/>

All Providers, when working with young people, parents and schools will as part of their service delivery, raise awareness on the hidden harms and exploitation within all forms of social media, social networking, mobiles, sexual bullying and the dangers of sharing both images and personal information.

**Sexual violence / childhood sexual abuse (CSA)**

**The Legislative Framework for Sexual Violence and Abuse**

There are two critical pieces of legislation governing the sexual offences laws in the UK; the Sexual Offences Act 1956 and the Sexual Offences Act 2003. The 2003 Act came into force on 1st May 2004 and applies to all offences committed on or after that date. The 1956 Act relates to cases where the offence took place before 1st May 2004 and remains relevant for some non-current sexual violence cases. Key offences covered within the Acts include the following where the victim does not consent to the act and where the defendant “does not reasonably believe” that the victim has consented; rape, assault by penetration, sexual assault, causing sexual activity without consent. The age of consent in the UK is 16 and a child under the age of 13 cannot legally consent to any sexual activity. For this reason, all reports of sexual activity with an under 13 year old are required to be reported to the Police and Social Care.

**What is Sexual Violence and Abuse?**

The World Health Organisation (2010) defines sexual violence and abuse (SVA) as ‘any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic, or otherwise directed against a person’s sexuality using coercion, by any person regardless of their relationship to the victim, in any setting including but not limited to home or work’. This definition includes rape. As per the Sexual Offences Act 2003 (SOA 2013), rape has legally been defined in the UK as the penetration with a penis of the vagina, anus or mouth of another person without their consent. Rape is defined as ‘physically forced or otherwise coerced penetration, even if slight, of the vulva or anus using a penis, other body parts or an object’. The attempt to do so is attempted rape. Rape of a person by two or more perpetrators is gang rape.

The SOA 2013 describes penetration of a vagina, mouth or anus with any part of the body other than the penis or with an object without their consent as “assault by penetration”. Sexual violence can include other forms of assault involving a sexual organ, including coerced contact between the mouth and penis, vulva or anus. Any sexual activity with a child under the age of 16 is an offence, including non-contact activities (such as encouraging to send nude photos online or making a child watch pornographic material) or encouraging children to behave in sexually inappropriate ways.

It is important to recognise that sexual violence and abuse can happen to anybody, of any age, regardless of sex, gender, sexuality, religion, cultural, social or ethnic background. It should also be understood as a cause and consequence of sex/gender inequality, and as a result, impacts disproportionately on women and girls. Sexual violence and abuse may be a one-off event or happen repeatedly over any period of time. In some cases it can involve the use of technology such as phones, internet or social media. Sexual violence and abuse can occur anywhere including in public, within the home or workplace and within organisations and institutions such as schools, religious settings and sports clubs. It may also occur when the person is unable to give consent while drunk, drugged, asleep or mentally incapable of understanding the situation.

Child sexual abuse (CSA) is when a child is forced or persuaded to take part in sexual activities. This may involve physical contact or non-contact activities and can happen online or offline. Children and young people may not always understand that they are being sexually abused. Contact abuse involves activities where an abuser makes physical contact with a child. It includes: sexual touching of any part of the body, whether the child is wearing clothes or not, forcing or encouraging a child to take part in sexual activity, making a child take their clothes off or touch someone else's genitals, rape or penetration by putting an object or body part inside a child's mouth, vagina or anus. Non-contact abuse involves activities where there is no physical contact. It includes: flashing at a child, encouraging or forcing a child to watch or hear sexual acts, not taking proper measures to prevent a child being exposed to sexual activities by others, making a child masturbate while others watch, persuading a child to make, view or distribute child abuse images (such as performing sexual acts over the internet, sexting or showing pornography to a child), making, viewing or distributing child abuse images, allowing someone else to make, view or distribute child abuse images, meeting a child following grooming with the intent of abusing them (even if abuse did not take place). There is not an actual offence of CSA, rather sexual offenders against children are charged with a range of sexual offences defined in law.

Child sexual exploitation (CSE) is a form of child sexual abuse. Sexual exploitation of children and young people aged under 18 involves exploitative situations, contexts and relationships where young people are manipulated or deceived in to sexual activity in exchange for something the victim needs or wants and and/or for the financial advantage or increased status of the perpetrator or facilitator. Child sexual exploitation does not always involve physical contact and can also occur through the use of technology without the child’s immediate recognition, for example being persuaded to send sexual images via the internet or use of a mobile phone. The key factor that distinguishes CSE from other forms of child sexual abuse (CSA) is the presence of some form of exchange, i.e. the child receives ‘something’ e.g. gifts, drugs, alcohol, accommodation or food in return for the sexual activity. In all cases, those exploiting the child/young person have power over them whether it is by virtue of age, gender, intellect, physical strength and/or economic or other resources. It is important to remember that the victim may have been sexually exploited even if the sexual activity appears consensual.

Over the recent years, the profile of sexual offences have been raised significantly due to high profile inquiries such as the Inquiry into Child Sexual Exploitation in the family environment, the Independent Inquiry into Child Sexual Abuse (IICSA) and the Independent Inquiry into Child Sexual Exploitation in Rotherham. Campaigns such as the #METOO movement and high profile media coverage cases involving well known individuals such as Jimmy Savile and Michael Jackson have also contributed.

**3. PREVENT**

Providers are expected to have an appropriate level of training regarding the Prevent agenda which is part of the government’s counter-terrorism strategy, CONTEST. Its aim is to stop people becoming terrorists or supporting terrorism.

<https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/97976/prevent-strategy-review.pdf>

Concerns should be reported where appropriate and engagement with the LSCB and organisation and local authority leads for PREVENT as necessary.

The exposure of young people (and adults) to extreme messages is a form of child exploitation.

The Service Providers of Services for children play an important role in helping young people to become more resilient to messages of violent extremists, and in tackling the sorts of grievances extremists seek to exploit, through creating an environment where all young people learn to understand others, value and appreciate diversity and develop skills to debate and analyse.

 Staff training

The Service Provider should ensure that their staff are trained and equipped to identify young people or adults at risk of being drawn into extremist actions, as well as challenge extremist ideas. All staff should know how to refer young people or adults at risk of being radicalised. All staff should be aware of the Government’s PREVENT strategy. The Council will make checks on the training of staff in this area.

 For more information on the Prevent / Anti-radicalisation strategy please see the following websites:

<https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/425189/Channel_Duty_Guidance_April_2015.pdf>

**4. HATE CRIME**

Hate crime or prejudice-based incident, whether a crime or not, is an incident which is perceived by the victim or any other person as being motivated by prejudice or hostility because of a person’s:

* Race
* Religion or belief
* Gender Identity
* Sexual orientation
* Disability

Hate crime, by individuals or groups, can take many forms such as:

* Assault
* Damage to property
* Offensive graffiti
* Neighbour disputes
* Arson
* Threat of attack and other intimidating behaviour
* Verbal abuse
* Offensive leaflets and posters
* Dumping of rubbish outside homes or through letterboxes
* Unfounded and malicious complaints
* Bullying

TheService Providerwill ensure that families within the centre as well as staff are protected from these crimes. Should they be perpetrated towards families or members of staff within the *centre* or outside of it, this will be reported to the police on 101 if this is not an emergency or 999 if it is an emergency. Following any incidences of hate crime families / staff will be supported to understand and process the emotions that go with these crimes and will support the family or member of staff to report this to the police.

### APPENDIX 5 – DATA PROTECTION AND GDPR

Service Providers must familiarise themselves with the requirements of the General Data Protection Regulations as set out in the following guidance from the Information Commissioner’s Office

<https://ico.org.uk/for-organisations/guide-to-the-general-data-protection-regulation-gdpr/>

### APPENDIX 6 – PROPERTY STANDARDS

The following sets out the Council’s general standards for Placements. The Service Provider may adjust this if the needs of the Child or Young Person require.

**PLACEMENT ACCOMMODATION**

**Room Sizes**

* Bedroom – 10m2
* Communal living room - 20m2
* Kitchen area – 9.3m2 or 12m2 if 6 Children and Young People (or two kitchens with a minimum size of 9.3m2 if more than 6 Children and Young People are resident
* Bathroom – 4m2
* Area to eat with table that can seat the maximum number of Children and Young People resident
* Ceiling height in all rooms must be a minimum of 2.3 metres

No Children and Young People should share a bedroom.

**Bathrooms**

There should be at least one bathroom for every 4 Children and Young People, in a separate room from all other areas. Bathrooms should never be more than one floor away from the Child or young person that will use them. Bathrooms should contain a sink (560mm by 430mm minimum), toilet and shower, with the addition of a bath optional. The shower cubicle should be of a standard size with a minimum of 800mm wide by 800mm depth. There should be constant supply of hot and cold water. Bathroom doors should be lockable from the inside with access able to be gained by staff with a key from the outside.

Floors should be of a non-slip material.

Anti-slip bath mats should be provided.

A separate toilet should be available for staff use.

**Water drainage**

All Placements should have an effective drainage system above and below ground, for the drainage of foul waste and surface water.

**Bedrooms**

All bedrooms should have the following furnishings:

|  |  |
| --- | --- |
| Single bed with mattress, minimum size 91cm x 190cm*All beds must be have fitted sheets and duvet – two sets of bed linen should be available and 2 pillows and cases*Bedside cabinet and lightWardrobeChest of drawersSuitable fixed lighting with light shades (not bare bulbs) | Changing table Mirror Comfortable chairSmall refrigerator Carpet or wood flooringCurtainsMinimum 4 power pointsLockable door that can be accessed by staff from the outside with a key |

**Kitchen**

Kitchens should have the following equipment:

|  |  |
| --- | --- |
| Sink with drainerChild locks on all lower cabinetsConstant supply of hot and cold running waterFull size cooker with hob, oven and grillRefrigeratorMicrowave oven Bottle warmer KettleToaster | Food storage cupboardsCutlery, crockery, pots and pans sufficient for the number of occupantsWork surfaces which are easy to cleanMinimum of four electric pointsAdequate lighting and ventilationA fire blanket A carbon monoxide detectorMinimum of 4 power points |

They should be a size of 9.3 square metres for up to 5 Children and Young People or 12 square metres if more than 6 Children and Young People are resident at the Placement setting.

Sharp knives should be controlled by the Service Provider and signed out to Children and Young People using them without supervision, following a risk assessment of each Child or Young Person

**Dining Area**

An area away from the bedrooms should be available for dining. This should be able to accommodate all Children and Young People at the Placement setting and contain a table and moveable chairs or bench type seating. Bar stools are not be used. This can be within the communal living room or as part of a kitchen diner area providing the kitchen area itself meets the minimum size requirements (excluding the area to eat).There should be Suitable fixed lighting with light shades and not bare bulbs.

**Communal areas**

In each Placement setting there should be a lounge in line with the size specified. This should contain sofa(s) of a suitable size to accommodate all Children and Young People at the Placement setting. This should be of good quality, comfortable and clean. It should comply with all British fire rating standards. A television that can receive Freeview should also be in place with a minimum size of 32 inches. The room should be carpeted or have wooden/laminate flooring. There should be a minimum of 4 power points. There should be Suitable fixed lighting with light shades and not bare bulbs.

**Lighting / windows**

All areas of the household that are habitable should have adequate natural lighting the equivalent of one tenth of the floor area. Windows should be double glazed or better, be able to open, have trickle ventilation vents and be lockable. Adequate artificial lighting should be in place in every room.

**Ventilation**

Adequate background ventilation must be installed in kitchen, bathroom and WC’s.

**Access**

The front door to the Placement setting should have high quality locks that meet insurer’s requirements in respect of British standards, and an intercom system. Children and Young People should access the Placement setting via the intercom and not have access to a front door key

**Internet access**

The Placementshould be equipped with high speed internet access and Wi-Fi throughout. Controls should be in place to restrict access to the following sites:

|  |  |
| --- | --- |
| PornographyRacismTerrorismExtremismEating disordersViolence | GamblingSelf-harmSuicideCrimeChild abuse |

**Heating**

Each Placement will have either a gas or electric (fixed and not portable) based heating system which provides heat in all rooms with controllable thermostats on each radiator. Adequate background ventilation will be in place where gas appliances are being utilised.

**Cleaning**

TheService Provider will be responsible for cleaning of communal areas of the Placement. All areas including lounges, kitchens and bathrooms will be cleaned twice a week. Where a Child or Young Person is not keeping these areas clean, tidy and hygienic the Placement setting will support the Child or Young Person to ensure that they respect these areas.

Individual bedrooms will be the responsibility of each young person dependent on age. Cleaning materials and devices (vacuum cleaner) will be made available for use by young people. It is expected that rooms will be cleaned twice a week in line with the communal areas. Where a young person is not cleaning their individual rooms they will be supported to ensure that this task is undertaken. Whilst every effort shall be made for the young person to undertake this themselves, however the room shall not be permitted to become dirty, and this task will be undertaken by the Placement setting where necessary. Where this has to be undertaken staff will report this to the social worker in their monthly report.

All young people should accept their responsibility to ensure that cleaning is carried out, with no young person completing in excess of their allocated responsibilities.

A young person’s laundry will also be their own responsibility, with the above caveat that a young person should not be allowed to wear dirty clothing, should they not undertake this task themselves they will receive support to do so, in line with the way which rooms should be kept clean, as described above.

A washing machine and ironing board/iron will be available. Suitable drying facilities will be in place without the need for having excessive amounts of wet clothing indoors.

Hazardous cleaning materials will be stored securely and subject to a risk assessment.

**Garden areas**

All garden areas should be kept tidy with grass cut regularly and maintenance / repairs made to any sheds or outbuildings.

Chairs should be made available for Children and Young People to spend time in the garden.

Dangerous / sharp equipment should be safely stored in locked sheds / outbuildings.

**CCTV**

CCTV should be installed in all communal areas, hallways, landings and the front and rear exit doors. CCTV should not be fitted in bedrooms or bathrooms.

**Windows**

All windows within bedrooms should be able to open. In some circumstances where a Child or Young Person is at risk of exiting through windows consideration should be given to using window restrictors. These will not be put in place without the authority of the allocated social worker and a discussion with the local fire safety officer within the fire service. A full risk assessment will be carried out by the Placement setting in this respect. Where Children and Young People may be in danger by having an opening window on an upper floor consideration should be given to moving them to a lower floor room.

Windows must be lockable to prevent intruders accessing the Placement.

**OFFICE ACCOMMODATION**

**Office area**

The Service Provider should ensure that there is an office space within the Placement*.* This should be used to maintain paper records, set up a PC, telephone lines, store petty cash, store medication, set up CCTV equipment, conduct meetings etc. This room should have a lock that can only be accessed by staff.

**Space for Private Meetings**

Separate space should be provided, away from bedrooms, to hold private meetings with social workers and staff from other agencies.

### APPENDIX 7 - PROPERTY AND EQUIPMENT MAINTENANCE

The following sets out the Council’s expectations for the provision and maintenance of electrical, gas and fire equipment within the Placement. However, should any relevant legislation, British Standard or industry best practice change during the term of this Contract the new guidance will take precedence.

**Electrical Equipment**

All electrical equipment will comply with UK and EU electrical ‘kitemark’ standards and be purchased from a reputable dealer, and not through online auction sites. Damaged and old equipment should be disposed of and replaced.

All electrical equipment should have a visual inspection for damage every 12 months. This should include checking leads and other areas that may have been damaged through use. These checks should be recorded in a written format. If a piece of electrical equipment that is moved around often and prone to cord damage is being used visual checks should take place every 6 months. An example of this type of equipment is a vacuum cleaner.

The Service Provider shall ensure that portable and transportable appliances are inspected and tested in line with the Electricity at Work Regulations 1989 and the most up to date guidance from the Health and Safety Executive – see link [HSE Guidance on PAT Testing](http://www.hse.gov.uk/pubns/indg236.pdf)

Every 5 years a qualified electrician (NICEIC registered) should inspect the wiring, sockets, switches, fuse boards and circuit breakers to ensure that they are still safe. Certificates detailing this work should be maintained. Any serious defects should be notified to the Council within 3 days of identification.

**Gas**

The Service Provider shall ensure that all gas appliances including, but not limited to, boilers, gas fires and cookers are inspected annually by a ‘Gas Safe’ qualified engineer. Copies of certification should be maintained. Any serious defects should be notified to the Council within 3 days of identification.

The Service Provider shall install Carbon Monoxide (CO2) alarms on each level of the Placement*,* including in the loft/attic if a gas appliance such as a boiler is located there. These should be tested weekly and batteries replaced annually, regardless of whether they have depleted. Hard wired CO2 alarms are preferred, however battery operated ones are acceptable.

**Fire Safety/Prevention**

The Service Provider should conduct a full fire risk assessment and document this with annual reviews.

Every floor of the Placementshould have a powder fire extinguisher, which can be used on all fires except cooking fats and oils. The extinguisher should be a minimum of 6kg.

Each kitchen area should have a wet chemical extinguisher, suitable for kitchen fires involving oils and fats. The extinguisher should be a minimum of 6kg. In addition a fire blanket should be available in each kitchen area.

All fire extinguishers should be serviced every 12 months or immediately if a defect is identified. Records must be kept on these visits and approved, competent engineers used to carry out this servicing.

Smoke alarms that detect both heat and smoke should be fitted on each floor of the Placement. As a minimum there should be two on each floor. These alarms should be hardwired into the mains electrical circuit, and not battery operated.

All bedroom, communal areas, kitchens and doors to/from escape routes should be fitted with 30 minute fire resistant fire doors, fitted with smoke seals and meet BS 476 – 22.1987 standards. These doors should be fitted with locks that can open from the inside without a key and can be opened from the outside with a key. Doors must close into the frame with a maximum gap of 3mm.

Under stair cupboards should be removed or upgraded to ensure they are lined with fire resistant materials.

Fire exit signage should be placed on each floor at intervals where it is clearly accessible where the fire route is.

Placementswith more than 3 floors or more should be fitted with emergency lighting on floors two (2) or above (the ground floor is counted as floor zero (0). Where these are fitted they should be hardwired into the mains electrical circuit, and not battery operated.

Where there is not a requirement for these due to only being a two storey property then LED high powered large torches should be made available on each floor, with batteries checked monthly and replaced annually regardless of if they have depleted. These should be kept for emergency use only and not used for other purposes unless absolutely necessary.

Keys to lockable windows should be kept in an accessible place in the event of fire.

A portable fire ladder should be available on each floor from one (1) or above, capable of reaching floor zero (0), the ground floor.

Internal escape routes should be clear of accumulations and hazards.

There should be one member of staff at the Placement at all times who is fire trained and competent in using fire extinguishers.

All furniture, curtains, bed linen, mattresses and cushions must meet UK fire resistance regulations to avoid the spread of fire and toxic fumes in the event of a fire.

**Legionella**

It is not usually necessary to undertake legionella testing in residential type properties, due to regular flushing through of water. The Service Provider will undertake a risk assessment to assess any risks and document these. This assessment should be reviewed every 3 years. Where the need to undertake legionella testing is identified the Service Provider will engage a suitable, qualified contractor to undertake this work. Certification will be maintained where this is necessary.

### APPENDIX 8 - MEMORANDUM OF UNDERSTANDING – CHILDREN AND YOUNG PEOPLE MISSING FROM PLACEMENT

The attached appendix is required to be signed and returned as part of the contract.

  

**Missing from Care**

**Memorandum of Understanding (MOU)**

**Between**

Essex Police, Southend, Essex and Thurrock Childrens Social Care

**and**

Residential Care Home/16+ Supported Living Provider /Local Authority Foster Care Provider/Independent Foster Care Provider

 **(Approved by Southend, Essex and Thurrock Local Safeguarding Children Boards)**

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The purpose of this document is to set out the joint co-operation between care providers and police as supported by each Local Authority within the County of Essex in relation to children who are likely to go missing or have gone missing.

Compliance with this MOU is required as per the Southend, Essex, Thurrock (SET) procedures.

Providers may be subject of checks to ensure that requirements of this MOU are complied with.

Definition of Missing

*Anyone whose whereabouts cannot be established will be considered as missing until located and his or her well-being confirmed.*

*(College of Policing Authorised Professional Practice guidance)*

Definition of a Child

*A child is anyone who has not yet reached their 18th birthday (SET Procedures).*

***Care Provider - Please complete a, b or c as relevant below:***

1. **NAME OF PROVIDER AND HEAD OFFICE ADDRESS OF RESIDENTIAL CARE HOME:**
2. **NAME OF PROVIDER AND HEAD OFFICE ADDRESS OF 16+ SUPPORTED LIVING PROVIDER:**
3. **NAME OF PROVIDER AND HEAD OFFICE ADDRESS OF INDEPENDENT FOSTER CARE AGENCY (IFA)**
4. **Introduction**

Missing children are amongst the most vulnerable in our community.

This Memorandum of Understanding (MOU) sets out the partnership working relating to children who run away or go missing from care homes, 16+ supported living provisions, residential and foster placements.

By working together effectively, it will be possible to prevent or reduce the frequency of children running away from home or care. Consequently, children living in Essex will be safer.

This document should be read in conjunction with the Southend Essex and Thurrock (SET) Child Protection Procedures. It should also be read in conjunction with local guidance in relation to children who are missing, and those children whose whereabouts are known, albeit not authorised and who are therefore away from placement without authorisation

**2. Care Home Provider / 16+ Supported Living Provider/Foster Carer’s Responsibilities:**

* As soon as practicablethe provider/carer should inform the Essex Police Missing Person Liaison Officer (MPLO) of the arrival at the home of any child *at risk of going missing*. If details are not known by the provider/carer, they are to obtain these from the social worker for the child.
* A child defined as *at risk of going missing* under the terms of this Memorandum of Understanding is a child with previous missing episodes and/or concerns in relation to Child Sexual Exploitation, Gangs, Criminal Exploitation, Trafficking, Honour Based Abuse, Forced Marriage, Female Genital Mutilation (FGM) and Radicalisation. A child is also *at risk of going missing* if placed into the county of Essex by another Local Authority.
* Unaccompanied Asylum Seeking Children (UASC) may be subject of trafficking offences in order to get into the UK. Once in the UK, they may be further trafficked and exploited. The sharing of information to police for all UASC placed in care is essential. Trafficking can be the movement, transportation, transfer or harbouring of children across continents, countries and borders for the purpose of exploitation of any kind. Trafficking can also be across counties, towns, or within a local area, for the purpose of exploitation. It is important to note that citizen children can be trafficked within the UK for the purpose of exploitation. It is important to hold in mind the possibility that your missing child might be at risk of trafficking.
* Complete a “Prepare for Missing” form (attached as Appendix A), if not before, then at the placement planning meeting. Once completed please send this by **secure email** to missingpersonliaisonofficers@essex.pnn.police.uk. All personal and sensitive data must be processed in accordance with the requirements under the General Data Protection Regulations (EU) 2016/679. Each party is responsible for ensuring that their organisational and security measures protect the lawful use of information shared under this MOU.
* Risks and changes to the care plan should be updated as and when they occur and the Missing Person Liaison Officer informed. Any additional friends and associates of the child should also be noted as well as being shared with the social worker**.**
* Completion of the Planning for Missing form is required for **all** children who are considered to be *at risk* of going missing including those placed in care from another Local Authority. The receiving authority and placing authority must, where possible, ensure this information is available.

**3. When the Child goes missing:**

* At a placement planning meeting the provider/ carer, child and social worker will agree a time for them to be home after school/ college and in the evenings/ weekends. This will be done taking account of the child’s age, level of understanding, development, vulnerability, and in light of known risks to the child. It will be the responsibility of the provider/ carer to make an assessment of the likely risk faced by the child and keep under constant review. This should be done in consultation with the relevant social worker.
* If the child does not return within the agreed time frame, the provider/ carer is required to take active steps to locate the child e.g. searching the home or locality, making contact with the child by phone, text and social media and visiting or telephoning the child’s friends, and unless reason not to, their family. If the provider/ carer knows where the child is and there are assessed to be no known risks – for instance, the child is at the address of a known friend and is assessed to be genuinely running late – the provider/ carer will agree a time with the child to return, or arrange to collect them. Unless there are health and safety reasons not to, the provider/ carer will arrange with the child to go to the address and collect them, as would be the case if the child were the provider/ carer’s biological child. This must be completed where practicable prior to calling police. If a child is likely to be at an address where they may be at risk of harm from the occupants or others associated with the occupant, the police will be called and the assessment of risk explained.
* If the child is considered to be missing, the provider/ carer is expected to provide information to the police informing of any checks already completed by the provider/ carer. This information is important as it may save time and prevent duplication of tasks set by police in order to locate a child.
* The provider/ carer is expected to continue to look for the child and make enquiries to help locate the child whilst missing, keeping the police and social worker updated (and out of hours services where relevant). Any new information must be relayed to police as soon as possible, as this may lead to further enquiries that police can undertake.
* If it is thought that the child is at risk by being at a known place, or with an individual who may be putting that child at risk and there are concerns that the provider/ carer would be put at risk should they try and retrieve the child, then the police should be informed in order to act upon that information.
* Once the missing child has been reported to the police any new information should be communicated by the provider/ carer by telephoning 101 and quoting the incident number you will have been provided. This must be passed to police as soon as possible, as officers will continue to search for the child until informed of their return.

**4. When the Child is found**

When the child is found by the provider/ carer, or if the child returns of their own accord, the provider/ carer must notify the police immediately. The social worker (or out of hours service) must also be informed. Do not delay this action under any circumstances, as the child will remain classified as a missing person until seen, along with efforts from police to locate the child.

**5.** **Essex Police**

On receiving a report of a missingchild, Essex Police will classify the child as missing.

Essex Police, in collaboration with the child’s social worker or out of hour’s service, will assess the level of risk faced by the child; this will be based on all of the available information.

* Essex Police will respond to missing children, based on the level of risk to the child and/or the level of risk the child poses to others.
* Essex Police will conduct a vulnerability interview for all children who have been missing and have returned. It may be that the child refuses to engage or speak with police. On these occasions the carer can assist by reporting to officers their observations on the child’s return, e.g. did the child shower, have gifts, appear unwell or under the influence of any substance, etc.
* Each child that returns from missing will be offered an independent return from missing interview by a person not involved in their care. This will be facilitated by the Local Authority with responsibility for the child.

**6. Care Planning and Review**

If a child has an established pattern of absence it would be expected some form of intervention should take place. The provider/ carer should consider whether this pattern is an indicator of vulnerability and whether any action can be taken to mitigate the risk of further missing episodes.

**It is important that this information is handled correctly with due regard to the General Data Protection Regulations.**

**Should you have any further questions please email your query to the same email address and someone will be in contact with you.**

**Name:**

**Organisation:**

**Tel no:**

**Position Held:**

**Signature:**

**Date:**

**Appendix A**

***\*\*Planning for missing form***

|  |  |  |
| --- | --- | --- |
|  |  |  |
| 13_crest_white |  |  |

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| --- | --- | --- |
|  |  |  |
|  | **Planning for Missing** |  |
|  |
|  | 'All sections are to be completed by the provider/ carer at the Placement Planning meeting, in consultation with the child’s social worker, when a child is identified as being at risk of going missing'. |  |
|  | Name of child: |       | Date of Birth: |       | Age: |      |  |
|  | Residential Address: |       |  |
|  |  |       |  |
|  |  |       |  |
|  |  |       |  |
|  |
|  | Point of contact for Home: Name/Number/Position Held:       |  |
|  |
|  | Person Completing form: Name/Position Held:       |  |
|  |
|

|  |
| --- |
| **SOCIAL/KEY WORKER DETAILS** |
| Forenames:       | Postcode:       |
| Title:       | Phone Number:       |
| Surname:       | Email Address:       |
| Premises:       | Street:       |
| District:       | Town:       |
| County:       |  |

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| --- |
| **CHILD’S DETAILS**  |
| **SURNAME:**       | **FORENAME(S): (include Alias names/nicknames)**        |
| **Date of Birth:**       | **Age:**       | Place of Birth:       |
| Sex: Male [ ]  Female [ ]  | Nationality:       |
| Immigration status (if applicable):       |
| Language spoken:       |
| Photograph Obtained: **Yes** [ ]   **To be e-mailed** [ ]   **(****compactphotos@essex.pnn.police.uk****)** |
| Known friends/associates and/or locations frequented?  |
|  |
| Mobile phone number:       | e-mail address:       |
| Facebook/Twitter or similar social networking sites (Any user names known)       |
| Missing person previously accompanied by (If left with other persons residents previously):       |

|  |
| --- |
| **CURRENT ADDRESS** |
| Premises (name and/or house number):       | Postcode:       |
| Street:       | Home Phone:       |
| District:       | Work Phone:       |
| Town:       | Mobile Phone:       |
| County:       |

|  |  |
| --- | --- |
| **ETHNIC APPEARANCE** |  |
| 1 White North European | [ ]  |
| 2 White South European | [ ]  |
| 3 Black | [ ]  |
| 4 Asian | [ ]  |
| 5 Chinese/Japanese or south east Asian | [ ]  |
| 6 Middle Eastern | [ ]  |
|  |

|  |
| --- |
| **CURRENT DESCRIPTION** |
| Height:      ft      inches or      M      cm | Shoe Size:       |
| Handed: Left [ ]  Right [ ]  Ambi [ ]  | Eyewear: Glasses [ ]  Contact Lenses [ ]  Not Worn [ ]  |
| Hair Type: (e.g. short, cropped)       | Hair Colour:       |
| Hair Features:       | Facial Hair:       |
| Eye Colour:       | Accent:       |
| Build: Please describe:       | Complexion:       |
| Sexuality: (if known)       |
| **Habits/Peculiarities:**       |

|  |
| --- |
| **WARNING** |
| Firearms | [ ]  | Weapons | [ ]  | Violent | [ ]  | Suicidal  | [ ]  |
| Physical health concerns | [ ]  | Allergies | [ ]  | Contagious | [ ]  | Self-Harmer  | [ ]  |
| Trafficking | [ ]  | Gangs | [ ]  | Drugs | [ ]  | CSE  | [ ]  |
| Radicalisation | [ ]  | FGM | [ ]  | Criminal Exploitation | [ ]  | Other |
| **Warning Notes:** if any of the above are ticked please give details:       |
| **Identifying Marks:** (scars/tattoos/piercings/dental/peculiarities)       |

|  |
| --- |
| **NEXT OF KIN** |
| Title: (Mr/Mrs/Miss/etc.)       | POSTCODE:       |
| Surname:       | Home Phone No.:       |
| Forename(s):       | Work Phone No.:       |
| Premises:       | Mobile Phone No.:       |
| Street:       | Relationship to missing person:       |
| District:       |
| Town:       |
| County:       |

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| --- |
| **ADDITIONAL INFORMATION** |
|  Bank Card Details: (If Known) |  | Card Provider: |  | Card Type: |  |
|  |       |  |       |  |       |  |
|  | Name on Card/Current location: (if known)  |       |  |
|  | Cash: |       |  |  |
|  |  |
| School / College / Place of Education Details:       |
| Phone Number:       |
| Disability: Yes [ ]  No [ ]  Please give details:       |
| Details of any illness known and/or medication:       |
| Religion:       | Doctor’s Details:       |
| Driving Licence No.: (if applicable)       |
| Phone Number:       |
| Languages Spoken:       | Dentist details:       |
| Blood Group (if known): | O+ | [ ]  | O- | [ ]  | A+ | [ ]  | A- | [ ]  |
| B+ | [ ]  | B- | [ ]  | AB+ | [ ]  | AB- | [ ]  | Phone Number:       |
| Passport Details: (consider DV/HBV/Forced marriage risk) |
|  | Passport Number: |  | Name on Passport: |  |
|  |       |  |       |  |
|  | Current location of Passport: |       |  |
|  |  |
| Are there any memorable dates i.e. the death of a family member or friend? Yes [ ]  No [ ]  Details:       |
| Z:\1996\lscb.jpg |  | Z:\1996\tsc.jpg |
| **Completed form to be emailed securely to:** **missingpersonliaisonofficers@essex.pnn.police.uk** |

### APPENDIX 9 - DEFINITIONS

|  |  |
| --- | --- |
| **Allocated Social Worker** | The Council’s nominated social worker regarding the Family to be assessed |
| **Child or Young Person** | The individual Looked After Child or Young person that is resident at the Placement (including the Education Placement where appropriate) |
| **Children or Young People / Children and Young People** | The cohort of Children and Young People resident at the Placement (including the Education Placement where appropriate).  |
| **Consultation** | Securing the wishes, views and feelings of a child and or giving information to a child in the most reasonable manner given the child’s age and understanding. |
| **Emergency Duty Team (EDT)** | The Council’s out-of-hours social work team who are the first point of contact for emergencies between Monday and Thursday 4:30pm to 9am, and Friday, from 4:30pm through the weekend until 9am on Monday public holidays |
| **Placement** | The Residential Home (with or without education provision) where the Child or Young Person is resident.  |