



Windows  
for Children

## Statement of Purpose



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# Windows for Children Statement of Purpose

## Quality and purpose of care

**The range of needs of the children for whom it is intended that Windows for Children provides care and accommodation.**

Windows for Children cares for children aged between five years and ten years upon admission with significant emotional and behavioural difficulties. We provide a safe, nurturing and stable environment to children who have suffered significant harm in their formative years. We recognise the children we care for are individuals, who have their own personalities, experiences, needs and risks.

Windows for Children works with and cares for children who display insecure attachment behaviours, and typically have a Disorganized Attachment style. We commonly support and care for children who have experienced many changes in caregiver and have become developmentally “frozen”<sup>1</sup> as a result of their traumatic and harmful early life experiences.

It is well known and founded that Disorganized Attachment behaviour in childhood is correlated with later behavioural and psychosocial difficulties including dissociative behaviour, controlling, externalizing or aggressive behaviour, conduct and attention disorders and mental ill-health<sup>2</sup>. Upon arrival at Windows for Children, children typically exhibit many of these behaviours and characteristics, have sensory processing difficulties, and have great difficulty regulating their own emotions and behaviours.

## **Ethos and outcomes and how we will achieve them.**

In our experience, a child placed with us lacks the ability to reside within a “family” environment, maintain friendships, and engage with the school curriculum. Typically, their full developmental potential (in all areas) and has been compromised by the trauma and adverse life events they have experienced. Windows for Children provides a ‘secure base’ for children in order to address the child’s attachment pattern and accompanying sensory modulation difficulties.

Windows for Children provides children with individualized care and rigorously strives to provide a safe, secure, nurturing, relaxed and homely restorative milieu; where every child’s care, well-being and sense of safety is of paramount importance.

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<sup>1</sup> Fahlberg V “*The child who is stuck*”, in Adcock M, White R (eds), *In Touch with Parents: Training materials for working with natural parents*, London: BAAF, 1984.

<sup>2</sup> Wilkins, David (2015) *The use of theory and research knowledge in child protection social work practice: A study of disorganised attachment and child protection assessment*. (PhD) thesis, University of Kent.

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Our therapeutic programme is based on a two-year placement with a supported and planned transition. We work intensively with children to support and facilitate progress in all areas of their development, using meaningful relationships as the conduit to achieve these goals. Windows for Children's over-arching aim is to help the child achieve, manage and maintain emotional and placement permanency. Windows for Children do not offer short-term or bridging placements as our therapeutic programme is an integrative approach, comprised of three stages;

1. Stabilization
2. Therapeutic Life Story Work
3. Preparation for Permanence

We recognize that negative experiences in-utero and in early childhood impact on a child's capacity to cope with stress throughout life. There is a tendency to either: flee and fight, freeze and dissociate, or fluctuate between these stress states when there is an unconscious trigger or a conscious reminder of traumatic events. Traumatized children tend to operate in persistent state of hyper-vigilance which impedes their capacity for filtering out "irrelevant" sensory experiences such as background sights and sounds. Upon admission, children are typically sensory defensive, as their sensory systems have become sensitized to the possibility of danger.

Although children have developed behavioural strategies early on, in order to survive their attachment environment, their coping mechanisms have often become maladaptive. Stage one of our therapeutic programme recognizes the need for stabilization, which entails supporting children in regulating their emotions and arousal states i.e., to shift from the Autonomic Nervous System's involuntary and instinctual bias of either flight, fight or freeze. Additionally, within stage one of our therapeutic programme, we focus on facilitating modulation of the body senses through the combination of up-regulating and down-regulating experiences, which in turn enables higher level sensory, emotional and cognitive functioning and co- regulation of a child's attachment style. Research has shown that Yoga helps traumatized individuals to tolerate physical and sensory experiences associated with fear and helplessness and increases emotional awareness and affect tolerance. Accordingly, the children also engage in yoga three times per week, which is facilitated by a (trauma-informed) yoga instructor.

Once greater sensory integration has sufficiently progressed and enabled higher order cognitive and emotional functioning, stage two of the programme commences. Stage two of the programme is designed to help a child make sense of their early life experiences and Therapeutic Life Story Work is facilitated by one of our qualified TLSW practitioners. The children continue to engage in direct work and group therapeutic sensory games to consolidate the sensory work undertaken within stage one of the programme too.

The final stage of our programme involves preparing a child for permanency; emotional and placement permanency. In over twenty-five years of experience delivering

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the programme, we have found that children often find transitioning into a “family” setting anxiety provoking and destabilizing, particularly as the children who come to Windows have typically experienced a number of placement breakdowns prior to residing with us. Without careful planning and preparation, a child can experience regression, making the final stage of the programme a critical part of the child’s therapeutic journey. We support the child in identifying the type of family they would like to transition into; it is crucial that the child’s feels their wishes and feelings are heard and central to their Care Planning. We work closely with Local Authorities to ensure that the placement match is appropriate to the child’s needs in order to reduce the likelihood of breakdown too. Additionally, we work with all relevant parties to devise an appropriate child-focused transition plan. The child’s transition from our care usually takes place over a period of 6-8 weeks, with the final day being marked by an individualized celebration. We continue to offer support to children and their carers after they have transitioned from our care, if it is in the child’s best interests.

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## Our Ethos – Windows for Children’s Principals

- Windows for Children believe that children should be involved in all aspects of their care and have a central role in any decision-making and/or care planning.
- Windows for Children believe that all children have the right to grow up within family settings. We work with children to ensure they can manage and maintain a subsequent transition into a more typical “family” setting.
- We believe residential care is often viewed as a “an anachronism, to be used only as a last resort”<sup>3</sup> but believe our therapeutic setting can intervene and alter a child’s fragmented trajectory.
- We believe that children should be safe from harm, feel safe from harm, and be able to develop, thrive and meet their full potential.
- Windows for Children believes in the importance of relationship-based practice and providing children with a secure base to foster other positive relationships.
- Windows for Children acts in the best interests of each child and promotes the child’s physical and mental health and well-being. Windows for Children value a child-led, play-based therapeutic approach as we recognise that children do not necessarily have the verbal language necessary to engage in traditional psychodynamic “talking” therapy. We recognise that behaviour is a form of communication, and can provide insight into a child’s thoughts, feelings and inner world too.

## Accommodation offered by the home.

The home is a substantial brick construction built in the late 1980s. It was specifically redesigned and refurbished for the purpose of accommodating young children with complex emotional and behavioural needs. Every effort has been made to engender and foster a familial feel to the home. Each child is accommodated in their own bedroom which is decorated each year and tailored to their current interests and

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<sup>3</sup> Narey, M. (2016) *Children’s residential care in England: Sir Martin Narey’s independent review of children’s residential care in England, and the government’s response*, Department for Education.

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needs. Children are given an array of platforms to express their views, wishes and feelings about their environment and within reason we strive to accommodate them. Children have input on the colour of their walls, the items of furniture, any decals or posters, curtains and various other soft furnishings. The smallest of the bedrooms is reserved for the sleeping-in member of staff.

The whole of the upstairs is monitored by a specifically commissioned Sound and Movement Monitor (SAMM). This system comprises of a series of passive infra-red sensors, which are placed in such a way that it allows the detection of individual children's movements upstairs. This information is relayed to a computer screen in the staff room, which is constantly monitored throughout the night, by waking night staff. All sounds are also relayed to the computer and can be recorded when necessary. There are no video cameras within the home, or any such intrusive equipment that would invade a child's privacy. Social Workers are made aware of this system prior to placement and sign an agreement for its use. The Children are also aware of SAMM and give their written consent. The use of SAMM is risk assessed to ensure the level of supervision is proportionate to the level of need and risk for each individual child.

The connected living and dining rooms are the heart of the home and much of the group work undertaken takes place here. Children's artwork and photos are all displayed on the walls and shelves, and the children are encouraged to "own" the spaces within the home. An extensive collection of games, books and appropriate DVDs are available here. The dining table was custom built to accommodate all the children and the staff simultaneously and forms a central space for sharing of food, thoughts, feelings and ideas. Within the home, there are four bathrooms.

In addition to the rooms already mentioned, there are four additional key rooms within the home. These include the games room, playroom, sensory room, and therapy room. At the front of the house there are two professional spaces, one is occupied by the Senior leadership Team, and is used for meetings with other care professionals. The other serves as a staff room with networked access to computers, training resources, and high-speed internet connection for quick accesses to our web-based recording, monitoring, and reporting system (SUE).

The home is licensed to care for up to eight children of both sexes, although our capacity will always be dependent on the needs of the accommodated children. Effective safeguarding underpins everything we do, and we would never care for eight children if it compromised our safeguarding and caregiving. Identified hotspots are risk assessed and mitigated through a combination of ergonomics, design, education, supervision and the setting and maintaining of consistent boundaries.

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The home enjoys the benefit of a very large garden with several adventure-style climbing frames, swings and slides as well as a child sized football pitch, patio area and quiet reflective pergola space. Each year, we re-develop the allotment space for the children to grow their own vegetables and herbs as part of the integrated therapeutic curriculum. We also re-introduce the sensory garden and mud kitchen.

Our home tutoring is delivered by a qualified teacher in the study. The “learning lab” is situated in the garden to help children’s transition back into an off-site provision e.g., the children educated on site dress in school uniform and ‘walk’ to the learning lab in the morning, just like they will do when they’re ready to transition into fulltime education again.

The home sits 150 feet back from the road and has a carpark with sixteen spaces ensuring that professionals visiting the home have the convenience of onsite parking and that the running of the home impacts on the local community as little as possible. Most importantly this also ensure that children can get into and out of vehicles in safety. CCTV enhances site security at the front of the home.





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## Location of the home.

The home is a modern eleven-bedroom house set well back from the road, in a suburban area of Chatham. The road consists of residential properties and is nearly a mile long and has a substantial hill at one end. It is approximately 2½ miles from the town centre and the train station. It is within easy reach of many schools, playing fields, leisure centres, shops and healthcare services.

The home is based in Medway, which is a unitary authority on the north coast of Kent. It benefits from an excellent rail service into London and easy access to two major motorways giving quick access to London and other placing authorities. The home is about 20 minutes from the Dartford Crossing giving access to counties north of London.

Within a fifteen-minute walk of the home there are three primary schools rated Ofsted 'Good' or 'Outstanding' giving children access to educational resources which will enable them to enjoy and achieve. Health and well-being are promoted through frequent visits to local sporting amenities such as swimming pools, parks and leisure centres where children can choose between a wide range of activities.

North Kent and Medway offer a wide range of historical and cultural places of interest from medieval castles through to historic dockyards as well as a range of theatres, cinemas and other opportunities for children to further their out-of-school learning.

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

We provide care which meets each child's needs and promotes their welfare, taking into account of the child's gender, religion, ethnicity, cultural and linguistic background, sexual identity, mental health, any disability, their assessed needs, previous experiences and any relevant plans.

Windows for Children is an inclusive organization and bound by shared values and common goals. We recognise the importance of faith, culture, creed and religion and respect and support every person's right to learn about, practice and share experience with others. We value tolerance and understanding and develop both through integration and experience. Our multicultural staff group are committed to delivering a multicultural experience to the children through a diverse range of festivals and food cultures as well as visits to sites of religious or cultural import.

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### How to make a complaint.

Windows for Children strive to achieve the highest possible standards at all times but should a child, a parent of a child, a person acting on behalf of a child, a neighbour or person living in the vicinity of the home or a representative of a local authority wish to complain about any aspect of our service, they should do so by either phoning (01634 660500) or emailing ([matt@windowsforchildren.org.uk](mailto:matt@windowsforchildren.org.uk)) to request a complaints form.

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## Child protection and behaviour management policies

Safeguarding is at the heart of everything we do. Our Safeguarding policies are congruent with national safeguarding legislation and national policy as well the local Medway Safeguarding Children Partnership (MSCP). Windows for Children additionally use the AIMS Projects<sup>4</sup> policy and procedures for managing sexually problematic behaviours in residential settings for children under ten. The guidelines are based on research and practice and were developed in consultation with staff within the residential sector and Local Authorities across the United Kingdom.

Our Designated Safeguarding Leads are;

Dr Jade Johns [jade@windowsforchildren.org.uk](mailto:jade@windowsforchildren.org.uk)

Carol Kemp [Carol@windowsforchildren.org.uk](mailto:Carol@windowsforchildren.org.uk)

We recognise that in order to keep children safe at all times it is necessary to maintain a high level of knowledge regarding positive behavioural support and de-escalation strategies and techniques. Windows adheres to the Non-Abusive Psychological and Physical Intervention (NAPPI) methodology and all staff are trained to level two. Windows employs a full-time NAPPI trainer to ensure that knowledge levels and standards are maintained at the highest level.

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<sup>4</sup> AIM Project (2005) Guidelines for Understanding and Managing Sexually Problematic/ Harmful Behaviours in Residential Settings, AIM Project, Building 3, Quay's Reach, South Langworthy Road, Salford, Manchester, M50 2PW.

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## Views, wishes and feelings

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

Listening to children and integrating their wishes and feelings into all aspects of their care is central to the Windows ethos. It is a fundamental part of establishing the trusting relationships upon which all of our work with children is built, whilst also supporting the work we do to develop self-esteem. We balance children's views, wishes and feelings carefully, considering them alongside their care and management plans and what all stakeholders assess as being in the child's best interests.

Children are frequently asked for their views, wishes and feelings concerning their daily routines, but more formal structures include monthly children's meetings and consultation documents. The children are involved in our recruitment procedures and staff appraisals. The children's right to advocacy and Independent Visitors is encouraged, promoted and supported. The children are involved in our audits and inspections, including our monthly Regulation 44 visits.

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

Windows is an inclusive, value driven organization committed to achieving the best possible outcomes for children irrespective of gender identity, age, race, religion/belief structure, sexuality, disability or indeed any other points of difference. To facilitate this culture, we ensure that all staff are knowledgeable, trained and have access to support. We have high expectations and staff know they must promote.

- Anti-discriminatory practice- staff are expected to be self-aware and be able to identify discriminatory attitudes, behaviour and language in children and other adults.
- A wholly inclusive environment for children where they feel valued and can participate fully in the activities of the home.
- Access to various local community resources so the children develop knowledge, understanding and tolerance of 'difference' within communities.
- Diversity to ensure Windows avoids a "one size fits all" blanket approach, but instead provides individualized care which allows children to develop their own identities.

Our approach to promoting children's rights is based on the central theme of Article 3 of the United Nations Convention on the Rights of the Child, *'In all actions*

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*concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be a primary consideration.'*

Windows for Children's value structure is built upon this notion, and it is the arbitrating concern in any question regarding decision making and planning on a strategic, daily, micro and macro level.

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## Education

### **The arrangements for education.**

Windows for Children recognise the fundamental role played by education in the development of children. It is unrealistic to expect that every child who transitions into our care will be able to successfully and meaningfully engage in formal fulltime education. In order to reduce the likelihood of further rejection and/or school breakdowns, and to ensure the child can positively participate in learning activities and formal education, it is usually necessary to help the child gain the felt sense of safety and stabilization that is required.

To facilitate the transition from crisis to successful integration into mainstream or specialist provision, Windows provides home-tutoring in stage one of the programme. Our Qualified Teacher's remit is to conduct a baseline assessment on entry, and build personalized learning pathways for the children, which integrate elements of a child's therapeutic plan. The education provided is rooted in experiential learning, to engender a love of learning and to spark the child's natural curiosity about the World.

We work closely with Virtual Schools, social workers, and the child's family (where appropriate) to ensure the tutoring is tailored to the child's curricular and care needs. Once the child is sufficiently equipped with the skills to cope with the rigours of a full-time educational experience, we work closely with relevant agencies to design a reintegration scheme lead by the child's individual needs.

Once reintegrated back into full-time specialist/mainstream provision, we continue to promote and meet a child's educational needs. Children are encouraged to participate in school teams, after school activities and clubs too.

Windows for Children is committed to working closely with all agencies involved in the provision of education. We believe that transparency and information sharing is a crucial part of ensuring children are able to successfully engage with the emotional demands of mainstream education, curriculum and perform against its assessment foci.

### **Supporting children with special educational needs.**

The children in our care typically have special educational needs, and we recognize that we play a key role in supporting the children to reach their full academic potential. We work with children in line with their personal education plans and EHC plan.

We take a proactive role and will contribute to formulating the child's personal educational plans and EHC plans. We routinely encourage the children's participation too, especially in the setting of their targets and recommendations. In our experience, a child is more likely to work towards achieving the targets if they feel invested in them.

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### Promoting educational attainment.

A Senior Manager, and qualified teacher, acts as our Educational Co-Ordinator. The role includes liaising with educational providers and regulators to ensure the child's emotional and therapeutic needs are being met within their educational environment. The Educational Coordinator and/or child's link-worker attends PEPs and is responsible for the research and application stages of a child's transition into mainstream/specialist provision.

Parents/Carers evenings are attended by either a member of the Leadership Team or the child's link worker. Homework sessions are supported by our carers and are held nightly to support children in their learning. The children have the option to have homework support from a QTS qualified teacher if they wish/ require this enhanced level of support.

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## Enjoyment and achievement

### **Creative, intellectual, physical and social interests and skills.**

In addition to the therapeutic games, educational trips and activities, the group games in the garden and sports activities; the children have access to a range of community-based clubs, sports and activities including, but not limited to; swimming, football, tennis, performing arts, after school club, street dance, Brownies, Cubs, Guides, Ballet, trampoline club and guitar/music lessons.

Each year the children benefit from a summer holiday. The holiday focuses on creating happy childhood memories and activities include trips to the beach, local theme/water parks, adventure activities including rock climbing, canoeing, building bivvys, orienteering and assault courses.

Windows also recognise the importance of promoting a child's awareness of their cultural and geographical locality and this is achieved through weekend visits to local sites of cultural, historic, or intellectual value. These trips include visits to castles, heritage towns, farms, museums, and attractions. These visits are often followed up with reflective work to crystallize the experience and promote ownership of the experience.

Engagement with local services and agencies is an important feature of our work with children and the home is frequently visited by representatives of the emergency services, health care professionals, outside educators and appropriate local government agencies.



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## Health

### Health Care and Therapy

Windows for Children recognise the importance of ensuring all children's health and well-being needs are monitored, assessed, kept under review and met. Children are helped to maintain a good standard of health and to manage any lifelong conditions.

At least three staff on duty at any given time have a suitable first aid qualification. Our First Aid kits are available in the staff room and our vehicles. The contents of these kits are checked on a monthly basis by the designated medication officer and replenished as needed. All incidents requiring first aid are logged and we have accident logs for staff and children. A dedicated Safety Officer has been appointed and conducts monthly site inspections identifying potential hazards/threats as well as maintaining the first aid kits.

Every child is registered with a local G.P. in addition to a local Optician and Dental Surgery. All of the children have annual health assessments and copies of the health assessments/plan are easy for all relevant staff to access within the children's file. Actions from their health plans are complied with, and pleasingly we have developed excellent relationships with the Specialist LAC Nurses and School Nursing team within our area. We can access additional support in a timely way e.g. guidance regarding enuresis to inform our management plans.

Windows ensure all meals at Windows are home-cooked, using fresh, wholesome ingredients. It is the Cook's responsibility to ensure that meals are nutritious, well balanced, interesting, and varied. Artificial additives, preservatives and colorings are avoided wherever possible, and the cook caters for individual dietary needs, taking into account race, creed, culture and beliefs.

Children are given choices over their meals, and allowed to have two 'dislikes', that they will not be expected to eat. The meals at Windows are varied enough to ensure that, even accounting for dislikes, children are still able to eat a well-balanced diet. Children are given the opportunity to change their dislikes once a month, if they so wish. Children are encouraged to try all foods that are not on their dislikes list, and their growth and weight are checked and recorded every month.

The level of neglect some of the children we care for have experienced means they are not able to use knives and forks, and have tried a very limited range of foods, and drinks. Staff always eat with the children as this helps provide opportunities for modelling, builds positive relationships, and helps prepare children for permanence in a "family" setting.

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Children are encouraged to participate in regular physical activities which not only aids their physical and sensory development but also improves their social skills, negotiation abilities, problem solving, impulse control, and self-esteem.

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## Positive relationships

### **Promoting contact between children and their families and friends.**

We are active in promoting positive and safe relationships. Where assessed as appropriate, Windows facilitates and supervises contacts for children and their families. We make every reasonable effort to support friends and family in their contact with their child and frequently collect and drop relatives at local train stations and hotels.

Children are encouraged to develop relationships outside of the home and these relationships are supported by creating a welcoming culture for guests when invited round for dinner and play sessions and, where appropriate and permitted, encouraging the children to visit their friend's homes. Every birthday is marked with a party and the child is encouraged to invite friends from outside of the home to attend. Cultural events such as Christmas, Easter, Coffee Mornings etc. are celebrated by inviting members of the community to the home to further develop the child's sense of place and identity.

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## Protection of children

### Monitoring and surveillance

Windows approach to supervision and monitoring balances the children's right to privacy with ensuring that they, and others, are kept safe from harm. Our risk assessments are robust, kept under regular review, and are revised following any significant incident in a timely way. The children we work with are at an age where it is appropriate to provide high levels of supervision. Shift teams are built to ensure that the staff/children ratio is in line with the children's individualized risk assessments and takes account of the group dynamics.

The most effective method of safeguarding children is through high levels of supervision, and this is our approach to keeping children safe throughout the night as well as through the day. Windows commissioned a purpose-built Sound and Movement Monitor (SaMM). The system allows for normal night-time movement (visiting the toilet) to occur without intervention but ensures staff can take proactive action in any situations that risk harm to a child. Local Authorities and children are made aware of SaMM upon arrival at Windows and are always asked for written for its use. It is regularly risk assessed and takes account of the child's wishes and feelings. One young person said about SaMM, 'It keeps me safe, because SaMM is there I know that somebody is looking after me.'

Windows for Children operate a CCTV system to monitor the carpark at the front of the building. No cameras are placed inside the house, or any spaces used by the children in their daily activities.

Windows for Children recognises and respects all individuals' right to privacy.

Under no circumstances is the system will be used covertly and signs are visibly posted to notify visitors as they enter the site.

The surveillance system is used to:

- Maintain a safe environment.
- Ensure the welfare of children, staff, and visitors.
- Deter criminal acts against persons and property.
- Assist the police in identifying persons who have committed an offence.

Outside of the home the children are supervised in accordance with their individual risk assessments and care plans.

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## Behavioural support

Windows is a value driven, trauma-informed organization. All of our work with children comes from our core belief that each individual must be treated with respect and dignity. The cultural norms and values are driven and modelled by the senior leaders within the home, and they underpin our behaviour support practice. A Senior Leader has a certificate in Dyadic Developmental Psychotherapy (DDP) and staff benefit from DDP and PACE training workshops. Everyone is expected to adopt PACE principles and work together to consistently implement the behaviour management strategies outlined within our policy, each child's individual Placement Plan and other 'relevant' plans.

**PACE stands for:**

Caption: The PACE model

<b>Playfulness</b>	Using a light-hearted, reassuring tone – similar to parent-infant interactions – to creating an atmosphere of safety and reassurance where no one feels judged and your child feels able to cope with positive feelings.
<b>Acceptance</b>	Acceptance is about actively communicating that you accept the feelings, thoughts and internal struggles that are underneath the child's outward behaviour. It is not about accepting the behaviour itself but helping to teach the child to not feel ashamed by their inner turmoil.
<b>Curiosity</b>	Curiosity, without judgement, is how we help children become aware of their inner life. It's about wondering out loud without necessarily expecting an answer in return. Phrases like "I wonder if..." will help the child to put a name to their emotions and thoughts.
<b>Empathy</b>	Feeling a child's sadness or distress with them, being emotionally available to them during times of difficulty shows the child that they are not alone and that the adult are strong enough to support them both through it.

(Sometimes 'L' for Love is included, making PLACE).

We recognise that all behaviours are a form of communication. Windows for Children's grown-ups strive to understand the meaning behind a child's behaviour. Windows for Children understand the factors that affect children's motivation to behave in a socially acceptable way and encourage positive behaviour through the use of positive behaviour strategies.

Windows for Children has high aspirations and expectations for all staff and children in the home. We help children in our care learn to feel safe is by having clear, easy to understand and fair limits. Within the home, there are clear non-negotiable expectations in regard to acceptable and unacceptable behaviour, which underpin the limits/rules set within the home. The rules are used to help children define their own behaviour and develop self-discipline, and the limits help the children learn to be responsible for the impact of their own actions and behaviour on others. The rules and behavioural expectations are applied sensitively and are not a rigid framework of discipline as we recognise that this can often lead to added confrontation and may mirror the interactions that children could have experienced in their early life.

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We strive to ensure that the children know that any unacceptable behaviour has not damaged their relationships but are an opportunity for growth. Windows for Children is a reflective environment, and we encourage the children to think carefully about their actions and encourage them to learn from experience and develop healthier ways to behave. However, we also understand that a child's ability to reason will differ and be dependent on the therapeutic progress they have achieved to-date.

In the early stages of the programme, we recognise that the children will require the grown-ups to regulate and manage their overwhelming emotions for them. Through the conduit of the relationship, and via observations, grown-ups learn to recognise a child's signs of hyper-arousal, hypo-arousal and potential triggers. Grown-ups become attuned to the child's needs and become able to recognise which activities and aides help calm the child.

Children in our Care are never 'punished' but are disciplined. Discipline functions to teach, guide and/or direct a child's behaviour. Discipline can increase a child's sense of safety, but it can also increase anxiety within a child. To enhance perceived safety, when disciplining a child, grown-ups strive to;

- Help the child understand why the grown-up has made the decision in a confident and clear way.
- Be open to the child's perspective without seeking 'agreement' from child, but ensuring the child knows they've been heard, but the grown-up remains confident in his/her decision.
- Convey the decision to the child, whilst showing empathy for the child's frustration (which is likely to occur because the grown-ups' decision is at odds with what the child wants.)

The following sanctions may be imposed upon children.

- a. **Reparation:** Involving the child doing something to put right the wrong they have done, e.g., repairing damage or returning stolen property.
- b. **Restitution:** Involving the child paying for all or part of damage caused or the replacement of misappropriated monies or goods. No more than two thirds of a child's pocket money may be taken in these circumstances if the payment is small and withdrawn in a single weekly amount. Larger amounts may be paid in restitution but must be of a fixed amount with a clear start and end period. If the damage is serious or the size of payment particularly large, then the child's Social Worker should be informed of the matter.
- c. **Curtailment of leisure activities:** Involving a child being prevented from participating in such activities unless the activity is part of a child's relevant plan e.g., Care Plan.
- d. **Additional chores,** involving a child undertaking additional chores over and above those they would normally be expected to do;
- e. **Early bedtimes,** by up to half an hour or as agreed with the child's Social Worker;

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- f. Removal of equipment, for example the use of a TV or video/DVD player;
- g. Loss of privileges, for example the withdrawal of the privilege of staying up late
- h. Suspension of pocket money for short periods.

We are committed to keeping children safe and understand that in order to do this it is sometimes necessary to implement physical restraints to prevent harm coming to the individual, the other children, members of staff and damage to property.

Windows adhere to the Non-Abusive Psychological and Physical Intervention (NAPPI) positive behaviour strategies. All staff are NAPPI level two trained, and we maintain one senior member of staff at NAPPI instructor level to ensure the highest possible standards of safety.

The aim of NAPPI is to focus on the Assessment, Prevention and Management of confused, unpredictable, and aggressive individuals. Our staff adhere to NAPPI's SMART Principles, which enable staff to remain calm, supportive, and professional, while utilizing highly effective yet non-abusive skills. New staff undergo NAPPI training as part of their induction and existing staff undergo 'top-up' training every year but have access to our on-site NAPPI trainer throughout the year to ensure the highest possible knowledge base is maintained.

A physical intervention is only used as a last resort and for the shortest amount of time necessary. All of the children have personalized Lalemand Scales which outline all of the individual child's strategies and de-escalation techniques, so the need for NAPPI is minimized as far as achievable.

As children make therapeutic progress, the children require less scaffolding, and begin to regulate their own emotions. The activities and strategies found to be effective are formalized within a child's Lalemand Scale. Children are encouraged to contribute to their behaviour management strategies and the formulation of their Lalemand Scales. Additionally, all grown-ups are actively involved in reviewing & revising each child's Lalemand Scale. Assessment is not a static process and grown-ups should not wait until the next formal review date if they observe or discover another effective strategy that needs to be incorporated into a child's Lalemand Scale. The children's Placement Plans are reviewed in consultation with key individuals and agencies within the child's network at least every six months.

# Windows for Children Statement of Purpose

## Leadership and management

### Registered Provider and Managers contact details.

#### Registered Provider/Responsible Individual

Dr Jade Johns

[Jade@windowsforchildren.org.uk](mailto:Jade@windowsforchildren.org.uk)

#### Registered Manager

Carol Kemp

[Carol@windowsforchildren.org.uk](mailto:Carol@windowsforchildren.org.uk)

#### Director

Matt Fenwick

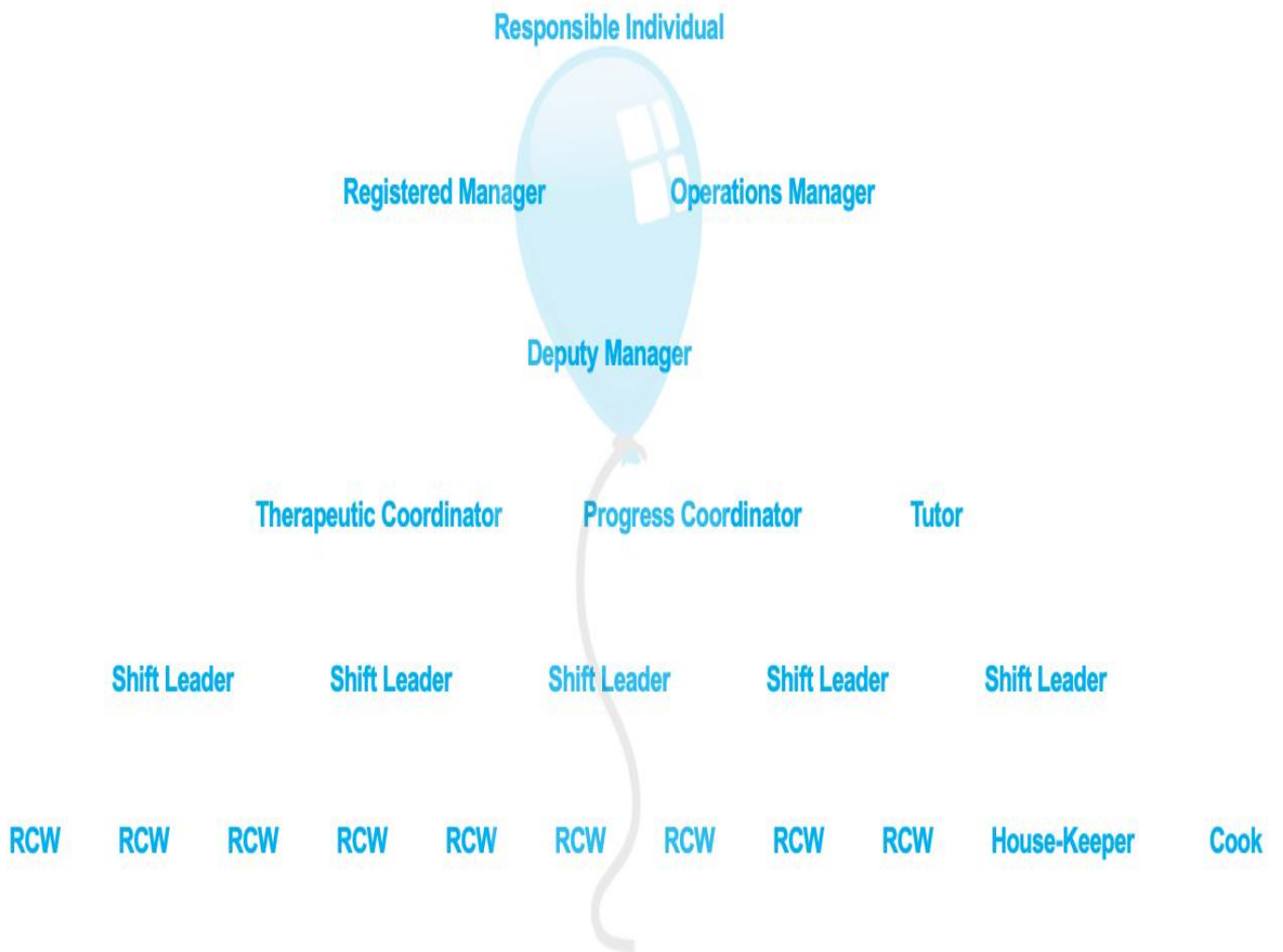
[Matt@windowsforchildren.org.uk](mailto:Matt@windowsforchildren.org.uk)

Telephone: 01634 660500



# Windows for Children Statement of Purpose

## Staffing Structure



# Windows for Children Statement of Purpose

## Experience and qualifications of staff

All managers working in the home have achieved the Level 5 Diploma in Leadership and Management for Residential Childcare.

All staff in a care role, including external agency or bank staff, hold the Level 3 Diploma for Residential Childcare (or an equivalent qualification<sup>1</sup>) or will achieve the qualification within the relevant timescale listed in regulation 28(3).

## Management and staffing structure and support.

Windows for Children has systems in place so that all staff, including the manager, receive supervision of their practice from an appropriately qualified and experienced professional, which allows them to reflect on their practice and the needs of the children assigned to our care.

Residential Care Workers are supervised by a Designated Senior Manager

### **Clinical Supervisors:**

Dr Andrea Shortland, Clinical Psychologist

## Promoting appropriate staff role models.

The home is properly staffed and resourced to meet the needs of the children. We have a stable team that affords children the stability they need to develop positive, trusting relationships with familiar adults and we promote appropriate role models of both sexes. Windows' policy is never to use agency staff or enlist students and we credit ourselves on our incredibly low staff turnover rate.

The staff involved in the day-to-day care of the children are of a range of ages; include both genders and vary according to social class, creed and ethnicity. We recognise that we care for children from diverse backgrounds, and in order to develop a healthy sense of self, sense of belonging and the ability to develop positive relationships with children and adults, diversity needs to be reflected within the staff group too.

Staff are suitably vetted and qualified and are able to deliver high-quality services to children and their families. The staff meet each child's behavioural and emotional needs, as set out in the child's relevant plans. Staff have been trained and are skilled in undertaking therapeutic direct work and group games with the children. Where we worry about a child's/young person's behaviour we add a positive behavioural support plan to their care plan too, which describes the behaviours likely to occur and what the triggers are likely to be. It also offers guidance as to the strategies (such as distraction, deflection, and withdrawal of the adult etc.)

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<sup>1</sup> The term 'equivalent' as used in the Regulations in relation to qualifications is based on whether the content of any qualifications held by the individual closely corresponds with the qualifications set out in regulation 32(4) (for those in a care role).

## Windows for Children Statement of Purpose

All of the children residing within Windows for Children have a link-worker, and have input into the allocation decision, and the relationship is regularly reviewed, as our therapeutic model recognizes that in order to develop healthier attachment patterns developing a secure base is critical.

In cases where we are unable to provide cultural, ethnic or gender-based role models we have successfully used independent visitors to address the need.

# Windows for Children Statement of Purpose

## Care planning

### Admission of children to the home, including emergency admission.

When considering referrals from local authorities, the care and well-being of the children already residing at Windows for Children is our priority. Firstly, we screen the referral information and generate an (IAR) Initial Risk Assessment, which takes into account the needs and risks of all our children as well as the needs/risks of the child being referred.

The next part of our admission procedure involves visiting the child in their placement to undertake a robust Impact Assessment. Our Initial Risk Assessments and Impact Assessments guide our decisions on whether to progress a referral, and we will only accept another child into our care if the outcome concludes we are able to meet all of the children's needs without compromising on the safety and high- quality afforded to our existing children. The assessment visit is managed sensitively with the child unaware of the purpose of the visit (as agreed by the Local Authority). We believe it is important to ensure the child is protected from any sense of rejection should we decide not to accommodate the child, whilst also recognizing the importance of thoroughly assessing whether we can meet the child's needs, without adversely impacting on the circumstances of the other children we care for.

We rarely accept a child's placement into the home without undertaking a full Impact Assessment. Windows for Children prefer not to accept "emergency placements" but the final decision regarding an emergency placement will depend on the available assessment information. We will consider an emergency placement depending on the outcome of the Initial Risk Assessment and continue to strive to follow our preferred admission's route, which is underpinned by good-practice and child- focused principles.

The wishes and feelings of all the children we care for is of paramount importance. After a positive Impact Assessment, the child referred is invited to visit Windows, and we only agree to the child's placement, if the child explicitly states they wish to live at Windows. Due to the warm, inviting, child-friendly environment, and the child's attachment style, we have never had a child say they do not want to move in.

Children are provided with a child-focused and friendly welcome book, which sets out what they can expect from the "grown-ups" in terms of respect and the boundaries and behaviour management techniques used within the home.

# Windows for Children Statement of Purpose

## Transitions from the home

Windows for Children recognise that for a new placement to get off to a good start the child needs to feel safe when they are in sole company of the carers and that this may take a significant amount of time as the child needs to transfer the sense of safety they have built with us to their prospective carers. Our transitions typically take place over a period of 6-8 weeks, but the timescale will always be guided by what is best for the child.

As previously discussed, stage three of our programme involves preparing a child for emotional and placement permanency. Without careful planning and preparation, a child can experience regression which will inevitably weaken the foundations for the new placement. We work intensively with the child and their network to prevent maladaptive coping mechanisms and responses resurfacing during this critical period. The work begins well in advance of the Local Authority approaching foster- carers/progressing re-unification plans and therapeutic preparatory work continues throughout this stage.

Windows for Children work closely with Local Authorities when the decision is made to progress permanency planning. Windows for Children provides a comprehensive profile of the child, clearly outlining the child's wishes and feelings too. Windows for Children accommodate;

- Updating a child's LA profile
- Reading prospective carers' profiles and advising the Local Authority on the suitability if the match
- Undertaking joint visits to prospective carers before a match is agreed.
- Attending transition planning meetings
- Contributing to Review Transition Planning Meetings
- Supporting birth parents during the transition
- Facilitating the initial contact between birth parents/carers and the prospective carers
- Supporting carers post-placement
- Visiting the child post-placement (if assessed/agreed by the child's corporate parent & Independent Reviewing Officer)
- Inform Medway Local authority when a child placed out of local authority area (POLA) leaves our care.

On the final day of a child's transition, we celebrate and acknowledge the child's journey with us. Children choose who they'd like to attend their personalized "event" and it may involve asking their friends/ family/ professionals to celebrate with them, before leaving with their carers to start the next stage of their journey.



Dr Jade Johns

Responsible Individual

17/08/2023



Carol Kemp

Registered Manager

17/08/2023

