

# CHAPTER 1

## INTRODUCTION

- 1 The regulations and guidance in this volume are concerned with the care of children in residential settings of various kinds.
- 2 In order to ensure that residential care is a positive and desirable way of providing stability and care for children homes (which include small children's homes falling outside the definition of Children Homes within the Act and which are known as "small homes") should set out to treat each child as an individual person and to promote and safeguard his or her welfare in every way.
- 3 This will be achieved by:
  - a. planning and review of each child's case, as required by these guidance and regulations,
  - b. staff exercising the concern that a good parent would by:
    - i. providing a safe environment which promotes the child's development, and
    - ii. protecting him or her from exposure to harm,
  - c. the Department being continually aware of practice in each home and how it contributes to the children's well-being.
- 4 This must be expressed through:
  - i. defining the principles upon which each home operates,
  - ii. establishing standards for practice,
  - iii. monitoring the operation of each home regularly, and
  - iv. ensuring that the management structures for guiding, supporting, monitoring and controlling all aspects of the work in children's homes are effective.
- 5 Residential care must be used in a planned way and in the best interests of the individual child, as an essential part of the overall network of services for children.
- 6 The major principles underlying the Children and Young Person's Act 2001, are concerned with:
  - i. partnership between parents, children, the Department and voluntary organisations,
  - ii. the involvement of the children in decision making,
  - iii. the involvement in decision making of those with parental responsibility,
  - iv. proper planning and review, and
  - v. the right to make representations.

|  |   |
|--|---|
|  | <p>7 The application of these principles to children in residential care should help to ensure that their placement is seen as part of the overall services for providing support to families and to children in need.</p> <p>8 Homes must be able to respond to children as individuals. The institutional needs of the home should never be allowed to dominate the lives of children or staff. The welfare of each child in each home and the conduct of the home should be subject to the same standards of provision and child care practices.</p> <p>9 The Regulations and Guidance are therefore designed to:</p> <ul style="list-style-type: none"><li>a. provide a framework of practice for the running of all children's homes,</li><li>b. emphasise the importance of safeguarding and promoting the welfare of individual children, and</li><li>c. describe the basic requirements for providing good child care in general, rather than a detailed guide to the elements of good practice which vary according to the needs of each child and the nature of each home.</li></ul> <p><b>DEFINITIONS</b></p> <p>10 A children's home is defined in the Children and Young Person's Act 2001 as -<br/>"a home which provides, or usually provides, or is intended to provide, care and accommodation wholly or mainly for more than 3 children at a time".</p> <p>11 The exceptions to this definition are:</p> <ul style="list-style-type: none"><li>a. health service hospitals, nursing, mental nursing or residential care homes, schools and custodial institutions,</li><li>b. if it is a home provided by the Department,</li><li>c. simply because a person has exceeded the usual fostering limit - three - to the extent that he or she is permitted to do, either because she or he is caring for a number of brother or sisters, or the Department has granted a special exemption.</li></ul> <p>12 A child is not considered to be in residential care if he or she is cared for or accommodated by:</p> <ul style="list-style-type: none"><li>a. his or her parent,</li><li>b. a person who has parental responsibility for him or her, or</li><li>c. a relative.</li><li>d. Nor when any of the following circumstances apply:<ul style="list-style-type: none"><li>i. any of the people listed above live at the home,</li><li>ii. the person caring for the child is doing so in a personal</li></ul></li></ul> |
|--|---|

capacity and not in the course of carrying out any duties in relation to a children's home.

**SCOPE**

- 13 The CYPA applies to:
- a. children's homes (which must be registered),
  - b. small homes (by Regulations only),
  - c. independent schools providing accommodation for a child.

But not homes provided and managed by the DHSS.

**REGULATIONS**

- 14 The following Regulations apply to those responsible for all children's homes within the meaning of the Children and Young Person's Act 2001:
- Children's Homes Regulations 2002,
  - Arrangements for Placement of Children (General) Regulations 2002,
  - Review of Children's Cases Regulations 2004.

See also Schedule 6 re Registration and Schedule 2(5) re Review of Cases.

- 15 The following regulations apply in the special circumstances indicated:
- The Children (Secure Accommodation) Regulations 2002,
  - The Small Homes Regulations 2004,
  - Inspection of Premises, Children and Records (Independent Schools) Regulations 2004.

**SCHOOLS**

Guidance on the welfare of children in most independent boarding schools will be found in Volume E in this series.

- 16 Independent boarding schools are subject to requirements for ensuring the welfare of children.
- 17 Independent schools usually have a very different ethos from children's homes. The Department will therefore use discretion and sensitivity in exercising their inspection functions.
- 18 The following types of boarding school will require different approaches.
- 19 Schools requiring rigorous inspection:
- a. Small independent schools whose boarders have all, or almost

all, been placed by the DHSS, the Isle of Man Department of Education or another LEA,

- b. Schools accommodating pupils 52 weeks a year,
- c. Schools specialising in catering for children whose parents are overseas and do not have a lot of contact with their children.

20 Schools requiring less than rigorous inspection:

- a. Schools where all the children go home at least at half-term and at holiday times,
- b. Schools with a large number of day-pupils,
- c. Schools with 50 or fewer boarders.

### **CHILDREN WITH A DISABILITY**

The needs of children with a disability are referred to on p.10 (staffing) p.21 (accommodation) and p.144 (after care)

Separate guidance in this series appears in Volume F, Services for Children with Disabilities.

### **SHORT TERM CARE**

21 The Children's Home and Small Homes Regulations also apply in specified circumstances to children placed for short periods in children's homes, whether as a 'respite care' arrangement or otherwise, and to the homes in which they are placed.

### **THE DEPARTMENT'S DUTY TO INSPECT**

22 The work of all homes should be regularly inspected in the interests of consistent good practice and ensuring that the well-being of the children is protected.

23 The CYPA 2001 states that –  
"Where a child is accommodated in a children's home, it is the duty of the person carrying on the home to safeguard and promote the welfare of the children accommodated in the home."

24 The Act requires that each children's home shall be inspected from time to time and for children to be visited from time to time in the interests of their welfare.

25 A system of formal and thorough inspection is required to:

- a. consider the operation of the home,
- b. lay down a framework of guidance and procedure for the daily conduct of homes, and
- c. provide for the implementation of the guidance and regulations in this volume.

26 The inspection process must be capable of:

- a. supporting staff in the home,
- b. gathering information objectively, and
- c. sufficient independence to assess the quality of care and safety in the home.

27 Inspection should be one part of a comprehensive system of quality assurance and designed to ensure that the service delivered meets its intended objectives and standards.

28 Whoever undertakes the inspection the Department's managers must be fully aware of practice in the homes and able to monitor their operation regularly and carefully.

29 The duty to inspect children's homes is separate from the Department's duty to review the case of each individual child under the Review regulations, guidance and Schedule 2 of the Act.

### **Inspectors' skills and experience**

30 The staff who carry out the inspections of children's homes should be qualified and experienced in child care and fully aware of the range of circumstances of children growing up in residential care. They must be able to assess both the quality and impact of the care planning for individual children and the quality of the residential environment.

## **STATEMENT OF PURPOSE AND FUNCTION**

31 Each home should draw up a statement of purpose and function continuing the following elements.

### **Overall purpose**

- 32 The particular purpose of the home should be set out in the statement. This might be to:
- a. work with children to prepare for a definite goal in a task centred manner,
  - b. reproduce family life as far as possible and support children into adulthood,
  - c. create a therapeutic environment, and work with children psychologically damaged by abuse or in need a systematic behavioural regime.

- 33 The statement of purpose is intended for:
- a. staff, parents and those making placements,
  - b. giving those responsible for managing the home a clear basis for management decisions.

### **Ethos and values**

34 The statement of aims and objectives should be as concrete as possible, clearly attainable, and capable of being measured or

evaluated. It should cover in broad terms:

- i. what the home seeks to do,
- ii. how care is provided, the ethos and values on which it is based, and
- iii. what is expected to happen at the end of the placement, including the approach taken to moving young people on to independence.

### **Practical arrangements**

35 The admissions policy should take careful account of the suitability of the home, its current staff and residents, to the needs of the child to be placed. It should cover:

- the age range,
- gender,
- any particular needs for care which the home sets out to meet, e.g. learning difficulties,
- the limitations on the home's care provision.

The statement should be sufficiently specific to be of value in regulating admissions without being so rigid as to preclude flexibility.

36 The statement should describe the procedures for admission which stem from the policy.

37 Some homes need extensive and detailed pre-admission procedures, particularly if the care needs which they address are specialised and precise.

38 Other homes may be prepared to admit in emergencies in which case the procedures are likely to concentrate on the admission process itself and immediate follow up. The referring agencies need to know the right children to refer; the admissions staff need to be clear that the referral is appropriate. Both referrers and admissions staff therefore need copies of the admissions policy.

39 The Statement should cover staff responsibilities:

- a. The number, relevant experience and qualifications of staff in post. In larger homes, children may be cared for in small groups with their own staff team probably headed by a unit or team leader,
- b. If any staff have special responsibilities these should be described and the staff listed,
- c. The name and job title of the person in day to day charge.

40 Additional information is to be provided:

- a. In homes - the person who has day to day responsibility, i.e. the head of the home or the officer in charge,

- b. In boarding schools - the names of the housemasters and housemistresses in addition to that of the head teacher. The information to be provided by boarding schools should normally appear in the prospectus and be available to parents, governors and all staff.

See Volume E in this series

- c. In privately owned homes - the name of the owner and the person in charge, and the managerial relationship between them.

41 The statement should be made available to:

- the person in charge of the home,
- the staff of the home and any other people working there,
- the children accommodated there.
- the parent or the person with parental responsibility for any child accommodated there,
- the Department,
- any body placing a child there.

42 The Statement should give details of the facilities and services provided, including any facilities for children with special difficulties or any specialised services.

The guidance on other matters to be covered in the Statement is contained later in this chapter.

## STAFFING OF HOMES

43 Homes should be adequately staffed.

### Establishment numbers

44 Judgements have to be made on staffing complements based on the needs of the children and the purpose of the home and any conditions of registration. No one ratio is suitable to all. The key considerations in deciding the number of staff for a particular home are listed below.

45 They should be:

- a. sufficient to support the home's aims and objectives,
- b. enough to provide both adequate supervision and activities appropriate to the age, gender and particular needs of the children concerned,
- c. appropriate to the number and ages of the children,
- d. adequate to achieve what is hoped for the children using the intended working methods.

|  |   |
|--|---|
|  | <p><b>Qualifications, competence, experience</b></p> <p>46 The competence, qualifications and experience required of the staff to ensure that the home's purpose can be fulfilled must be considered (subject to any conditions of registration).</p> <p>47 A wide range of professional and vocational qualifications is relevant to residential care. Every effort should be made to recruit suitably qualified staff.</p> <p>48 If it is not possible to recruit qualified people, seconding current staff to obtain appropriate qualifications should be considered. Alternatively, support might be brought in from outside to supplement the team's current skills.</p> <p>49 Homes which use behavioural or psychotherapeutic methods must ensure that the senior staff are properly qualified and that they directly lead the practice in the home.</p> <p>50 Children's homes should never attempt to use methods of care which require a level of competence, experience or qualifications which the staff team does not possess. If necessary the objectives of the home should be changed to reflect what realistically can be achieved.</p> <p><b>Staff development and training</b></p> <p>51 All staff, including those who are appropriately qualified, need on-going training to ensure that a body of competence and expertise appropriate to the home's purpose is maintained.</p> <p>52 Those in charge of the home should be expected to arrange suitable training programmes taking account of the individual needs of staff.</p> <p>53 General training needs are likely to include:</p> <ul style="list-style-type: none"><li>• developing basic childcare skills,</li><li>• developing specific awareness of culture, religion and race,</li><li>• child protection,</li><li>• HIV/AIDS.</li></ul> <p>54 Staff should be expected to develop:</p> <ul style="list-style-type: none"><li>• a range of techniques for working with children,</li><li>• specific skills required by the home's aims and methods.</li></ul> <p>55 Specific skills for working with children with disabilities include those required by residential care staff looking after children with disabilities.</p> <p>56 The training should seek to:</p> <ol style="list-style-type: none"><li>a. instil a positive attitude and approach to dealing with particular disabilities,</li><li>b. emphasise the importance of enabling the child to achieve</li></ol> |
|--|---|



|  |  |
|--|--|
|  | <p>maximum independence within his or her capabilities,</p> <ul style="list-style-type: none"><li>c. promote feelings of self-confidence and self-worth in the child, encouraging staff to treat a child with a disability as they would any other child and avoid being over-protective,</li><li>d. where appropriate, develop the communication skills necessary for working with children who have a visual or hearing impairment, or severe learning difficulty.</li></ul> <p><b><i>Ways of meeting training needs</i></b></p> <p>57 The managers of homes should consider supporting staff to study in any way suitable:</p> <ul style="list-style-type: none"><li>a. on distance learning courses (for example the Open University),</li><li>b. by attending external short courses or part-time courses.</li><li>c. through in-house training.</li><li>d. in joint training with other groups of staff and carers.</li></ul> <p><b>Vetting staff and others in regular contact with children</b></p> <p>58 Those managing residential care for children are expected to carry out thorough checks on the suitability of staff before appointment including photograph identity, employment history, documentary evidence of qualifications, references, general practitioner report (in some cases), and criminal record check.</p> <p><b><i>Criminal records</i></b></p> <p>59 These checks should be made in respect of prospective employees and others who fall into any of the following groups:</p> <ul style="list-style-type: none"><li>a. full- or part-time employees,</li><li>b. people placed by training schemes,</li><li>c. volunteers and,</li><li>d. in some circumstances, regular visitors to the home.</li></ul> <p>60 Those responsible for homes should give clear written guidance to staff on the regulation and vetting of visitors to ensure that children are not exposed to potential harm. The home's daily log should always include an accurate, daily record of the names of all visitors.</p> <p>61 When children are to be placed in lodgings the people responsible should also be checked. The premises should be visited, the landlady or landlord interviewed, and a report written.</p> <p>Checks should only be made on people short-listed for appointment.</p> <p>62 Requests for references from previous employers or other referees should include a specific enquiry as to whether there is any impediment to the prospective staff member being employed in a</p> |
|--|--|

situation where he or she will have some responsibility for the care of, or substantial access to, children living away from home.

63 Proof of qualifications should be required to be produced.

64 Applicants should be required to give a satisfactory explanation of any gaps in their C. V.

### **Selection methods**

65 The following criteria for suitability should be assessed. There must include tests for:

- a. maturity,
- b. sound judgement and
- c. a realistic understanding of the needs of children and young people.

66 Selection should also test a candidate's ability to withstand personal stress and willingness to receive support. Staff should be able to provide a good example to the children.

67 Experience alone is not necessarily an advantage unless it can be shown to have enhanced the candidate's understanding and skill.

### **Ensuring the safety of children**

68 Those inspecting homes are expected to check carefully that all the action advised here is undertaken, as appropriate.

69 The authority is required to notify those set out at Regulation 26(1)(b) (which includes the Department) of behaviour which suggests that a person is not or may not be suitable for work with children.

### **Race and gender balance**

70 Those responsible for recruiting staff should make every effort to ensure that the composition of the staff group reflects the racial, cultural and linguistic background of the children cared for.

71 Black children should have positive experience of being cared for by black care givers wherever possible.

72 There should also be a proper balance of male and female staff.

### **Staff support**

73 Those responsible for running homes should ensure that staff are properly supported in the demanding and potentially stressful and isolating work of caring for children in a residential setting.

74 This may be achieved by means of:

- a. written guidance,
- b. staff supervision,

|  |   |
|--|---|
|  | <p>c. staff meetings,</p> <p>d. training, and</p> <p>e. external consultancy.</p> <p>75 Where the officer in charge does not have access to a line manager consideration should be given to appointing a "mentor" who can provide professional support.</p> <p>76 Housemasters and mistresses in boarding schools should have someone to turn to for advice and support.</p> <p><i>Written guidance</i></p> <p>77 Staff in all homes should clearly understand their duties.</p> <p>78 As a minimum, each person should have a written job description. In addition they should be provided with written guidance on important procedures.</p> <p>79 Depending on the nature of the home, procedures and guidance may be required on:</p> <ul style="list-style-type: none"> <li>• Admission and reception of children,</li> <li>• Case recording and access to records,</li> <li>• Log book and diary recording,</li> <li>• Care planning,</li> <li>• Reviews,</li> <li>• Placements,</li> <li>• Confidentiality,</li> <li>• Methods of care and control,</li> <li>• Dealing with aggression and violence,</li> <li>• Risk taking,</li> <li>• HIV/AIDS awareness, confidentiality and infection control,</li> <li>• Dealing with disclosure of sexual abuse,</li> <li>• Treatment of children who have been abused,</li> <li>• Dealing with sexuality and personal relationships,</li> <li>• Care practices towards children of the opposite sex to staff,</li> <li>• The particular care needs of children from minority ethnic groups and practices within the home to combat racism,</li> <li>• Working with parents,</li> <li>• Administration and security of finance (petty cash),</li> <li>• Purchasing,</li> </ul> |
|--|---|

|  |  |
|--|--|
|  | <ul style="list-style-type: none"> <li>• Repairs and maintenance,</li> <li>• Fire precautions and emergency procedures,</li> <li>• Statement of safety policy,</li> <li>• The extent to which all, or any part of, the premises may be locked as a security measure,</li> <li>• Child Protection Arrangements for regulating and vetting visitors to the home,</li> <li>• Arrangements for checking lodgings and vetting landlords and landlords,</li> <li>• Disciplinary and Grievance procedures,</li> <li>• Delegated authority and notifications to senior staff,</li> <li>• Rostering,</li> <li>• Shift handovers,</li> <li>• Sleeping-in, bed-time and night supervision.</li> </ul> <p>80 The procedures and guidance should be available to all staff at all times in a handbook or some other suitable form. They should be kept up to date and assembled in such a way as to be amenable to easy revision.</p> <p><i>Staff supervision</i></p> <p>81 All staff who come into contact with the children should receive regular individual supervision from their line manager, whether or not they are employed as care staff</p> <p>82 Supervision should be on a one-to-one basis, in private, and so far as is practicable free from interruption. Staff should have the opportunity to express their feelings arising from the care of the children, and be helped to understand those feelings.</p> <p>83 Supervising staff should assure themselves that the staff members' responses to children are appropriate to the methods used in the home, and that the extent of their personal involvement with children is appropriate. Wherever possible staff should be given direct practical guidance.</p> <p><i>The frequency of supervision</i></p> <p>84 The frequency of sessions should be set down in writing, taking account of the nature of the home and demands placed on the various members of staff.</p> <ol style="list-style-type: none"> <li>a. Care staff should receive supervision for one to one and a half hours, not less than every two to three weeks,</li> <li>b. Other staff should have supervision every two to three weeks, but the length of each session would not normally need to be</li> </ol> |
|--|--|

|  |  |
|--|--|
|  | <p style="text-align: center;">as long.</p> <p>85 Notes of the issues covered in supervision should be made by the supervisor and a copy provided for the staff member. The notes should contribute to identifying the training and staff development needs of the staff member.</p> <p><b><i>Staff Meetings</i></b></p> <p>86 Staff rotas should be organised in such a way as to allow all the staff, or as many as possible, to meet together regularly in order to:</p> <ol style="list-style-type: none"> <li>a. promote the cohesion of the staff group,</li> <li>b. facilitate group supervision,</li> <li>c. combat the fragmenting experience the children will have of the staff group as a consequence of staff working shifts,</li> <li>d. provide scope for mutual support.</li> </ol> <p>87 All the staff responsible for the welfare of the children should meet regularly so as to:</p> <ol style="list-style-type: none"> <li>a. contribute to decisions affecting the running of the home, and</li> <li>b. develop common awareness of the needs of the children.</li> </ol> <p>88 Meetings should be timed so that part-time staff may, as far as possible, attend.</p> <p><b><i>External Consultancy</i></b></p> <p>89 External consultancy helps to reduce the sense of isolation and provide a source of support not associated with accountability to line management.</p> <p>90 Those running a home need to decide whether to seek consultancy support and the purpose of it which may be to:</p> <ol style="list-style-type: none"> <li>a. focus on the needs of the children, or</li> <li>b. concentrate on staff support.</li> </ol> <p>91 A written agreement should be made which clearly defines the role of the external consultant and distinguishes it from the management function.</p> <p>92 Homes which use behavioural or psychotherapeutic methods must ensure that on-going, in-house training for staff is part of the ethos and regime. It is expected that external consultants with appropriate specialist expertise will be engaged to provide additional support to staff and guidance in the treatment of particular children.</p> <p><b>The organisation of care in homes</b></p> <p>93 An appropriate management structure must be created to ensure that staff are deployed and responsibilities divided so as to meet the</p> |
|--|--|

care needs of the children in the best way.

### *Deputy head of home*

- 94 A member of staff must be clearly designated to deputise in the absence of the person in charge. Ideally the same person should be responsible every time and the role should be included in his or her job description.

### *Allocating staff time*

- 95 The organisation of the staff team should allow for the largest number of staff to be on duty at the times when there is the greatest demand from the children.
- 96 Staff time for their other responsibilities should also be scheduled free from direct contact with the children. These responsibilities include:
- a. making entries in records,
  - b. planning activities,
  - c. carrying out treatment or care programmes,
  - d. receiving supervision.
- 97 In boarding schools the deployment of staff with care responsibilities for must take account of any teaching responsibilities they have.

### *Night duty*

- 98 The staff rota must take account of the number of staff required to be on duty at night, whether they remain awake or can sleep in.

### *Key staff responsibility for children*

- 99 The responsibility for particular children is allocated to staff must be clearly established by the person in charge. The way staff come on and go off duty and how information is passed between them must ensure continuity of care and maximize the effectiveness of staff coming on duty.
- 100 The responsibility for individual children may be by way of a key-worker system. In a boarding school each child may be allocated a personal tutor.
- 101 Children should feel free to choose with which staff they form special relationships. The allocation of staff responsibilities should not restrict the children from developing relationships with other staff members.
- 102 All those working at the home should be aware of each child's placement plan.

## **ACCOMMODATION**

- 103 Regulation 11 requires suitable and properly equipped and furnished

accommodation to be provided for each child in a home, including disabled children accommodated in children's homes

104 Regulation 12 requires the provision of sufficient of the following facilities:

- washing,
- bathing and toilet facilities,
- as well as adequate:
- heating,
- lighting,
- decoration,
- maintenance etc,
- laundering facilities, including those to enable children to wash and iron their own clothing,
- access to a telephone.
- for children to meet privately with parents and others.

105 The welfare of each child accommodated in a home must be appropriately provided for. Those responsible for the home must make sure that each child's accommodation is designed to secure her or his welfare and development, as well as taking account of general management needs.

106 The accommodation should contribute to the achievement of the home's aims and objectives, and should be described in the Statement referred to on p. 6 above.

### **PLANNING THE LOCATION OF A HOME**

107 A home should, as far as practicable, be situated in a location which supports its aims and objectives. The following points should be taken into consideration:

- a. easy access by public transport,
- b. ease of access to schools, shops, youth clubs and other community facilities,
- c. providing an environment suitable to the development of the children to be accommodated,
- d. indistinguishable from any ordinary family residence in outward appearance and situation,
- e. the optimum size, bearing in mind that it should, as far as possible, look like an ordinary domestic setting,
- f. a location which promotes security and safety, for young children in particular,

- g. factors which help or hinder coping with difficulties of control,
- h. any aspects of siting or design which might assist in maintaining positive relationship with the neighbourhood,
- i. In boarding schools, easy access to the main school facilities out of school hours.

A site shared with other social services facilities is unlikely to be suitable.

## **STRUCTURE AND LAYOUT OF HOMES**

- 108 When accommodation is being planned or an existing home adapted, the accommodation should, as far as practicable, be able to meet the needs of individual children.
- 109 The size, shape and location of bedrooms and other rooms should facilitate choice about where the children spend their leisure time. They should allow for contact with the whole community, involvement with small groups of children and/or adults, as well as opportunities for complete privacy.
- 110 There should be scope for children to personalise areas of the home that are regarded as their own. They should be able to display posters or pictures on their bedroom walls, if they wish. They should be able to store personal possessions in their own cupboards and/or chest of drawers.
- 111 The choice about whether or not a child has a room of his or her own or shares with siblings will depend on the best balance which can be achieved in meeting the individual needs of each child and the practical limitation to resources.
- 112 Homes are required to:
- a. make available for everyday use a place where a child can make and receive telephone calls in private,
  - b. provide facilities for visits to the children by family or friends.
- 113 Planning should also provide for staff needs, including:
- space suitable for staff to have private discussions with children, or an office,
  - accommodation for staff on sleeping-in duties, depending on number and gender of the children:
- 114 Where there are children of both sexes, sleeping-in rooms should be provided for both male and female staff,
- 115 Where there are very few children, and/or all of them are of the same gender, it may be sufficient for only one staff member to sleep in,
- 116 Emergency cover must be allowed for in every case so that an adult



is always available even when, for example, a child needs escorting to hospital.

- 117 Practical considerations include:
- a. basic essentials which are comfortable, or a high standards of design and maintenance, and homely to look at,
  - b. adequate levels of lighting, heating and ventilation in all parts of the home used by children,
  - c. sufficient lavatories, wash basins, baths and showers with hot and cold water, for the resident children' use.
- 118 To provide for privacy and prevent opportunities for abuse:
- toilets and bathrooms should be sited near each child's bedroom,
  - doors should be lockable, with the facility for staff to open them from the outside if necessary,
  - they should be planned on a domestic scale. Any communal bathing facilities should provide for privacy.
  - wherever practicable, children should have a choice as to whether they take a bath or a shower,
  - baths and showers should have thermostatic controls,
- 119 Baths, showers and toilets should be accessible to children with physical disabilities where they are accommodated in the home.

See page 21

## DECORATION AND FURNISHING

- 120 Regulation 11 requires suitable space, furniture, bedding and furnishings, including curtains, floor covering and, where necessary, equipment.
- 121 Practical arrangements within a home should include:
- a. decor and furnishings which emphasise comfort and informality, and
  - b. furniture and equipment which is:
    - i. appropriate to the age of the child, and
    - ii. enables the needs and wishes of individual children, including children with disability, to be met sensitively, avoiding uniform standards.
- 122 Dustbins, meters, heating equipment and fuel storage tanks should be sited carefully so as to avoid health or hygiene hazards, or an institutional appearance.

## **MAINTENANCE**

- 123 Regulation 12(2)(b) requires children's homes to be maintained in a good state of structural repair, clean and reasonably decorated and maintained, for the sake of both comfort and promoting the child's positive feelings for his or her surroundings.
- 124 The children should have a say in the decor and upkeep of the home if they wish, especially their own rooms.
- 125 The exterior of the home should be maintained in sound structural and decorative order.
- 126 Any gardens, or grassed or hard play areas, should be kept in good order, and fenced appropriately, according to the ages of the children.

## **LAUNDRY**

- 127 Laundry facilities should be provided in the home so that:
- a. the children always have clean bedding, towels and clothes, and
  - b. they can be encouraged to do some or all of their own washing.
- 128 Children's homes must be adequately equipped to meet both purposes depending on their size.
- a. A utility room with a domestic washing machine and drier may be adequate in a smaller home,
  - b. A larger home may require heavy duty machines as well as domestic machines suitable for the children to use, preferably located separately,
  - c. Centralised or external facilities may sometimes be appropriate depending on the need for heavy washing loads to cope for example with bed wetting and soiling.

It should be part of the role of care staff to teach children how to do their own laundry, and look after their own clothes.

## **ACCOMMODATION FOR CHILDREN WITH DISABILITY**

- 129 Homes which accommodate disabled children are required to provide what is reasonably necessary in order to meet his needs arising from his disability so as to enable him to live as normal a life as possible.
- 130 The aim should be to integrate the child in every aspect of life in the home, not merely the physical aspects.
- 131 The key principle when planning to meet the needs of a child with a

disability is that he or she is first and foremost a child. All the other principles which underlie the meeting of children's needs apply whether the she or he has a disability or not.

- 132 In order to integrate the child into the home's life it may be necessary to adapt the physical environment. This may involve:
- a. the provision of access for wheelchairs,
  - b. ground-floor level sleeping accommodation,
  - c. hand rails on stairways and/or corridors,
  - d. suitably adapted bathing and washing facilities,
  - e. specific lighting or decoration schemes, or
  - e. specialised visual or hearing aids.

### **GOOD ORDER AND DISCIPLINE**

- 133 Staff must have a sound understanding of the principles and procedures for the care and discipline of the children and the treatment methods used so that they can respond to the children with confidence. This will depend upon:
- a. well defined objectives,
  - b. systems of control and discipline which are strongly integrated with:
    - i. the management system, and
    - ii. the system of care practice and planning.
  - c. Staff setting standards by their own behaviour.

The children need a clear understanding of the reason why they are placed in the home.

### **PHYSICAL RESTRAINT**

- 134 Physical restraint should be used rarely and only to prevent a child harming himself or others or from damaging property. Force should never be used for any other purpose, including seeking to secure compliance with staff instructions.
- 135 To maintain good order and discipline, especially where children have suffered damaging experiences and have difficulty in developing self control or good personal relationships, homes should have:
- a. a clear statement of purpose,
  - b. high standards of care practice and planning,
  - c. a clear policy on how and when restraint may be used.
- 136 To implement the policy effectively:

- a. Sufficient, able staff should be employed to make sure that the children are dealt with sensitively and with dignity,
- b. Training should be provided,
- c. Managers should regularly and formally monitor staff awareness of the policy and rules,
- d. Relationships between the staff and the children must be positive, based on honesty, mutual respect, and recognised good professional practice,
- f. A structure of daily routines should be applied, giving a good balance between free and controlled time,
- g. Individual boundaries of behaviour must be clearly defined for each child,
- h. Expectations must be realistic, and methods of control consistent and sensitively applied.

## DEALING WITH MISBEHAVIOUR

### Good professional practice

- 137 Misbehaviour by young people often stems from adults' failure to be sufficiently receptive to the needs and problems of the young people rather than from a wilful defiance of authority. Children should not be labelled as disruptive or misbehaviour resolved by moving a child or young person to a new placement without the original behaviour being properly addressed.
- 138 Control and discipline will enable children to develop inner self-control, establish feelings of worth and self respect, and be motivated to improve their behaviour and to live in harmony within a group. They should be encouraged to develop a proper awareness of their own rights and responsibilities and those of others.
- 139 Consulting children on their wishes and feelings in matters which concern them is one of the key principles of the Children and Young Persons Act 2001. Good order is much more likely to be achieved where children are routinely involved in decision making about their care. They should be encouraged to accept responsibility for their own care, appropriate to their age and understanding.

### Disciplinary measures – General

- 140 The Children's Homes Regulations 2002 and Small Homes Regulations 2004, prohibit various forms of punishment, except in cases where the Department is permitted to disregard some of its duties towards children if it is satisfied it is necessary in order to protect the public from serious injury.
- 141 The prohibited disciplinary measures include:

- corporal punishment,
- intentional deprivation of food or sleep,
- restriction of visits,
- inappropriate clothing,
- giving or withholding medication,
- imposition of fines (except reasonable reparation),
- intimate physical examination,
- a measure imposed by another child, and
- punishment of a group for the behaviour of an individual

Prohibited disciplinary measures are discussed on p.26 below.

142 The Human Rights Act 2001, which incorporates Article 3 of the European Convention on Human Rights, strengthens legislation by prohibiting all forms of inhuman and degrading treatment and punishment. Care workers and others acting in a public capacity are prohibited from administering severe punishment or ill-treatment which falls within the scope of Article 3. Treatment regarded as falling within the scope of Article 3 depends on the level of severity, and the age, sex and state of health of the victim.

The Human Rights Act is due to be in force in 2004.

### **Permitted disciplinary measures**

- 143 Sanctions are necessary for handling behaviour which would be reasonably regarded as unacceptable in any family or group setting.
- 144 The home should set out in writing the forms of discipline which may and may not be used.
- 145 Those which may be used must be appropriate to the age and circumstances of all the children accommodated. They could include:
- reparation,
  - restitution,
  - curtailment of leisure extras,
  - additional house chores, and
  - the use of increased supervision.
- 146 All staff must be made aware of the acceptable measures, the extent of their discretion in administering them, and the requirement to record their use on each occasion.
- 147 Homes should monitor regularly the use of sanctions and other measures of control.
- 148 The Department should review the appropriateness of the approved

|  |   |
|--|---|
|  | <p>disciplinary measures annually.</p> <p>149 The Department should seek legal advice about the measures to be approved and their use, and ensure that the staff responsible for monitoring, managing or inspecting homes also have access to legal advice.</p> <p><b>Recording disciplinary measures</b></p> <p>150 A record of the use of sanctions should be kept in a log book. This record should be separate from the daily log. Every entry in the discipline record should include:</p> <ul style="list-style-type: none"> <li>a. the name of the child,</li> <li>b. a description of the measure: <ul style="list-style-type: none"> <li>i. when and where it was taken and in the case of any form of restraint, for how long,</li> <li>ii. the reason why it was taken including details of behaviour leading to the measure,</li> <li>iii. the person by whom it was taken and (where appropriate) the names of other persons present,</li> <li>iv. the effectiveness and consequences of the measure.</li> </ul> </li> </ul> <p>151 Entries should be written in appropriate language.</p> <p>152 All names, including that of the signatory, should be clearly identifiable.</p> <p>153 Each entry should be signed by a person authorised to sign on behalf of the home.</p> <p>154 The monitoring records should be scrutinised in any inspection.</p> <p><b>Formal disciplinary measures</b></p> <p>155 Formal measures should usually only be used after the repeated use of informal discipline measures, such as mild or more severe verbal reprimands, have proved to be ineffective.</p> <p>156 Where the use of sanctions is felt to be necessary, it should be:</p> <ul style="list-style-type: none"> <li>a. done at the time, not later,</li> <li>b. relevant to the misbehaviour, and</li> <li>c. just.</li> </ul> <p>157 The repeated confrontation of children about the consequences of their actions by different staff should be avoided if possible. Staff need to recognise when the matter is over and the subject should be dropped.</p> <p><b>Rewards</b></p> <p>158 In normal circumstances children should be encouraged to behave well by the frequent expression of approval by staff and by the</p> |
|--|---|

|  |  |
|--|--|
|  | <p>generous use of rewards rather than by the extensive imposition of disciplinary measures.</p> <p>159 A system of rewards could include:</p> <ul style="list-style-type: none"> <li>• commendations,</li> <li>• extension of privileges,</li> <li>• expressions of approval</li> </ul> <p><b>Prohibited disciplinary measures</b></p> <p>160 The disciplinary measures prohibited under Regulation 13(4) are listed below. Guidance is given about each of them.</p> <p><i>Corporal punishment</i></p> <p>161 The use of corporal punishment is not permitted in residential child care establishments.</p> <p>162 The term "corporal punishment" should be taken to cover any intentional application of force as punishment. It includes:</p> <ul style="list-style-type: none"> <li>slapping,</li> <li>throwing missiles,</li> <li>rough handling,</li> <li>punching or pushing in the heat of the moment in response to violence from young people.</li> </ul> <p>163 Corporal punishment does not include:</p> <ul style="list-style-type: none"> <li>taking necessary physical action, where any other course of action would be likely to fail, to avert an immediate danger of personal injury to the child or another person, or to avoid immediate danger to property,</li> <li>"holding", which is often a helpful, containing experience for a distressed child.</li> </ul> <p><i>Deprivation of food and drink</i></p> <p>164 Deprivation of food and drink includes the denial of access to the amounts and range of foods and drink normally available to children in the home. It is not appropriate to force a child to eat foods he or she dislikes. It would, however be appropriate to encourage a child to try a wide range of foods.</p> <p style="background-color: #e0e0e0;">Withholding specific food or drinks on medical advice is not regarded as deprivation.</p> <p><i>Restriction or refusal of visits/communications</i></p> <p>165 The restriction or refusal of contact as a punishment is not permitted.</p> <p>166 Placing restrictions on certain individuals making or receiving visits may sometimes be necessary as part of the management or planning</p> |
|--|--|

|  |   |
|--|---|
|  | <p>of the child's case.</p> <p>167 Protecting children from visits is sometimes necessary to safeguard or promote welfare. Decisions on contact should be guided by the planning decisions of those who have parental responsibility for the child. If contact is restricted in accordance with these plans it should be recorded on each occasion in the child's personal records. If parents insist on visiting a child despite this being contrary to the care plan staff should find tactful ways of dealing with this and counsel the child.</p> <p>168 Visits to and by children in secure accommodation must be compatible with the efficient management of the home. They may be less appropriate than in other settings. It is legitimate to control unplanned visits.</p> <p><b>A Court Order may affect contact.</b></p> <p><b><i>Requiring a child to wear distinctive or inappropriate clothing</i></b></p> <p>169 Distinctive or inappropriate clothes include:</p> <ul style="list-style-type: none"><li>i. any recognisable punishment uniform or badge,</li><li>ii. clothes inappropriate to the time of day and/or the activity being undertaken.</li></ul> <p><b>This Regulation applies to footwear and hairstyles as well.</b></p> <p>170 The prohibition does not apply to distinctive clothing such as:</p> <ul style="list-style-type: none"><li>i. sports kit,</li><li>ii. school uniform, or</li><li>iii. uniforms for e.g. Scouts or Guides.</li></ul> <p><b><i>The use or the withholding of medication or medical or dental treatment</i></b></p> <p>171 This would be a dangerous and utterly unacceptable practice and is accordingly totally forbidden in all circumstances, whether as a disciplinary measure or otherwise to control the child.</p> <p><b><i>Intentional Deprivation of Sleep</i></b></p> <p>172 This could cause grave psychological damage and seriously affect physical health, and is not allowed. It could also be regarded as degrading or inhuman treatment under Article 3 of the European Convention on Human Rights.</p> <p><b><i>Imposition of Fines</i></b></p> <p>173 It is not appropriate to use fines as sanctions.</p> <p>174 Withholding part of pocket money for misdemeanours may be an appropriate sanction. It is best restricted to cases of wilful damage</p> |
|--|---|



or misappropriation of money or goods.

- 175 No more than a maximum of two-thirds of a child's pocket money should be withheld. Reasonable sums by way of reparation are acceptable.

### *Intimate Physical Searches*

- 176 Intimate physical searches of children are totally unacceptable.
- 177 Occasionally it may be necessary to search a child's clothing, e.g. for weapons. If this does not allay anxieties about the child's own safety or that of others, he or she must be kept apart from the rest of the group and closely supervised by a member of staff. This should not be treated as punishment.

If it is suspected that a child has secreted drugs on his or her body, the police should be notified.

### *Other prohibited sanctions*

- 178 The following sanctions are all prohibited:
- Withholding aids or equipment needed by a disabled child,
  - Any measure imposed by another child,
  - Any punishment of a group of children for the behaviour of one.

### *The use of accommodation to physically restrict a child's liberty*

- 179 Physical restriction of liberty by the Department is prohibited except:
- a. under criteria set down in section 27 of the Children and Young Persons Act 2001 (Children (Secure Accommodation) Regulations 2002.

See chapter 8 and Annex X

- b. under section 76(4), when a child remanded to accommodation provided by the Department may be detained.
- 180 The legal interpretation of "restriction of liberty" is a matter for a court to decide. Any practice or measure which prevents a child from leaving a room or building of his or her own free will may be deemed by a court to constitute "restriction of liberty". Two examples indicate the difficulty.
- 181 Locking a child in a room, or part of a building, to prevent him or her leaving voluntarily has been found to be written the statutory definition in the UK.
- 182 Other practices which restrict freedom of mobility, e.g. creating a human barrier, are not so clear cut. The European Convention on Human Rights makes it clear that children outside the criminal justice

system can only be detained in circumstances where the aim is to provide "educational supervision". This concept includes many aspects of the exercise by a local authority of parental rights for the benefit and protection of the person concerned.

- 183 The following practices are not regarded as "restriction of liberty":
- Locking external doors and windows at night time for security purposes,
  - Refusing permission to go out (e.g. "gating" in schools) short of measures which would constitute restriction of liberty.

- 184 The responsible authority must give staff clear, written guidance on the extent to which the home, or any part of it, may be locked as a security measure.

If there is any doubt as to what is permissible reference should be made to the guidance in Chapter 8 and legal advice sought.

## HEALTH

### Medical assessments

The CYPA Regulations which relate to health considerations - Placement of Children (General) Regulations 2002, found in Annex B, and the Review of Children's Cases Regulations 2004, in Annex C, apply to everyone responsible for placements of children in homes.

- 185 The agencies and people responsible include:
- i. the Department, when it has placed the child,
  - ii. anyone carrying on a home.
- 186 This means that unless a child has been examined and a medical assessment made within three months immediately before a placement, one of these agencies must arrange for a medical examination and written health assessments for every child:
- i. before a placement if possible, or
  - ii. as soon as possible afterwards, if necessary.
- 187 There is one important proviso. If the child is of "sufficient understanding" and refuses to be medically examined he or she cannot be obliged to undergo examination.
- 188 The responsible agency should also have consideration to the following health issues:
- the child's state of health,
  - the child's health history,
  - the effect of his or her health history on his or her development,

- the existing arrangements for his or her medical and dental care and treatment and health and dental surveillance,
- the possible need to take action to change the existing care, surveillance or treatment, and
- the possible need for preventive measure, e.g. vaccination or immunisation, and sight or hearing screening.

### **Priority for continuing health care**

189 When a child continues to be looked after and provided with accommodation the responsible agency must also arrange for further medical examination and written assessment on the child's state of health and need for health care:

- i. at least once every six months up to the child's second birthday, and
- ii. at least once every twelve months after that, unless the child is of sufficient understanding and refuses to be medically examined.

### **The role of care staff and house staff in boarding schools**

190 Care staff should take a proactive approach to ensuring the good health of children in homes. They must be vigilant in monitoring children's health. Where a child's health care needs have been neglected in the past because of frequent disruption or disturbance, this must be remedied.

191 Staff must play an active part in promoting all aspects of a child's health, especially if he or she has not had continuity of health care because of a recent series of moves.

192 The staff role must include:

- i. treatment of illness and accidents, and
- ii. education about alcohol and other substance abuse, sexual matters, and HIV/AIDS. In boarding schools this should be part of the curriculum.

193 In boarding schools house staff should work closely with the staff responsible for health education and other health related matters.

### **Choice of General Practitioner**

194 It is preferable for a child to continue with his or her own GP, if his or her stay in a home is likely to be short, or the home is near to his or her own home.

195 The child should have a choice of GP, if possible. In particular he or she should be able to have a doctor of her or his own gender if they wish.

196 Pupils in boarding schools will often be registered with a GP and dentist near their family's home. If the parents wish to retain prime

responsibility for their child's health, the school should act in partnership with them. If, for example, the parents prefer that medical or dental check-ups are carried out during the holidays, the school should still ensure that check-ups have, in fact, taken place.

### **Inter-agency practice**

197 Every effort must be made to ensure close co-operation and effective communication between:

- those with parental responsibilities,
- the staff in the home,
- the GP,
- the health visitor,
- the school health service, and
- any necessary specialist services.

### **Special health care needs**

198 Staff should be fully informed about conditions which require:

- special medication such as diabetes, epilepsy or haemophilia, or
- a special diet, such as coeliac disease.

199 Staff should also have an understanding of the medical conditions to which certain races are susceptible, such as thalassaemia and sickle cell anaemia, and their treatment.

200 Staff should get advice about the medical care of children who have mental or physical disabilities, and how to meet their special needs. Care staff should take responsibility for ensuring that these children receive proper daily health care and that medicines are stored safely. This advice should be recorded in the child's individual health record so that it is available to other care staff when needed.

201 Staff should be aware of issues surrounding HIV and AIDS.

202 Staff must take precautions all the time to avoid situations which could result in the transmission of HIV infection.

### **Health records**

203 A health record must be kept for each child. It should build on earlier records. If these are not available, every effort should be made to obtain them.

204 The health records must be kept up to date with information about the child's:

- health needs and development,
- illnesses,

- operations,
- immunisations,
- allergies,
- medications administered,
- dates of appointments with GPs and specialists.

205 When the child leaves the home the records should be passed on to whoever will have the subsequent care of him or her.

206 Records should not show the antibody status of a child who is HIV positive. This information should be held separately, on a need to know basis only.

### **Safe storage of medication**

The regulations about the safe storage of medication in homes can be found later in this guidance in Regulation 14 Children's Homes Regulations 2002 and Small Homes Regulations 2004.

207 Medicines including those available without prescription must be stored and handled safely to safeguard the children's well being. With the following exceptions, all medication must be kept in a secure place such as a locked cabinet.

208 The exceptions to this requirement are that:

- in boarding schools all medicines may be kept and administered by the matron or a similar person,
- children who may safely administer their own medication should be provided with a secure place to keep their medication.

### **The administration of medication and recording**

209 Each home should have procedures laid down for the administration of medications. These will vary depending on the characteristics of the children accommodated.

210 Advice should be sought from the Community Pharmacist on the administration and safe storage of medications and appropriate ways for recording their use.

211 The administration of medicines should be recorded on every occasion in both:

- a central register, and
- on the child's individual record.

212 In cases where a medicinal product may not be safely self-administered, it should only be administered by a member of the staff or by a doctor or nurse.

### **Consent to medical treatment**

- 213 The Department and each home must have clear policies and procedures on consent to medical treatment for children accommodated by them or on their behalf.
- 214 The policies and procedures on consent should be included in the child's care plan/placement plan.
- 215 The health authority should be informed of the policy and procedures.
- 216 Staff should have a clear understanding of the policy and procedures on consent to medical treatment.
- 217 Where the child is of sufficient understanding medical treatment may only be given with his or her consent.
- 218 Where the child is not of sufficient understanding the consent of the parent is required. This includes a person who has parental responsibility for the child or young person, including the Department (or a local authority) if the child is in care.
- 219 Doctors can of course administer treatment or medication without consent in emergencies.
- 220 The home must lay down firm guidelines on the procedure to be followed for administering medication in an emergency.

### **Parental consent to treatment**

- 221 Staff must be able to obtain medical or dental treatment for a child without delay or confusion, or ensure this through parental action.
- 222 The most convenient system is usually for the parent, or those with parental responsibilities to agree that:
- staff arrange for routine treatment or minor procedures,
  - their consent must be sought for major procedures of operations, except that:
  - in an emergency where delay would be dangerous, immediate action must take place.
- 223 Parents, and those with parental responsibilities, should be informed on a routine basis about their child's state of health.

### **Children and young people's consent to treatment**

- 224 Children of 16 and over can give their own consent to medical treatment.
- 225 Children under 16 may also be able to give consent depending on their capacity to understand the nature of the treatment.
- 226 It is for the doctor to decide whether a child or young person is capable of giving informed consent.

227 Children who are capable of giving consent must not be medically examined and treated without their consent. Staff should, however, help and encourage young people to understand the importance of health care and take responsibility for their own health.

## **EDUCATION**

The relevant provisions on education are:

Children's Homes Regulations 15,

Small Homes Regulations 15,

Placement of Children (General) Regulations 4 & Schedule 3,

Review of Children Cases Regulations 5 and Schedule 2.

228 Children's homes must give special prominence to promoting education, providing particular help and encouragement to enable children, who are often severely educationally disadvantaged, achieve their full potential and equip themselves as well as possible for adult life.

### **The role of care staff in supporting education**

229 Where encouragement and support from parents has been lacking, care staff should aim to compensate by helping the young people to catch up with their peers.

230 In boarding schools, where it is not possible for the child's own parents to fulfil the role of interested and supportive parents the care staff should assume this role, whether or not they also have teaching responsibilities.

231 Staff should:

- i. observe the child or young person carefully so that they have a sound understanding of his or her strengths and difficulties,
- ii. recognise and applaud his or her achievements and encourage him or her to take pride in success,
- iii. provide sympathetic support and encouragement to persevere when a disappointment is encountered,
- iv. be aware of the possibility of bullying or other discrimination at school, and be prepared to deal with it, in conjunction with the school.

### **Working together to meet special educational needs**

232 Care or boarding staff should work actively with teachers to ensure that any learning or other difficulties a child is experiencing are identified at an early stage, and plans are made deal with them.

233 Appropriate steps should also be taken to foster any particular talents.

|  |   |
|--|---|
|  | <p>234 Children with learning difficulties such as dyslexia should be provided with particular assistance.</p> <p>235 Care staff and teachers should work together to ensure that young people with special educational needs gain access to the specialist services provided by the Department of Education.</p> <p>236 For young people who do not have English as their first language, staff should ensure that the language tuition provided at school is supported in the home by help with reading and writing and opportunities to practise conversation.</p> <p>237 In homes care staff must maintain effective links with each school attended by children residing in the home and should forge good relations with schools and colleges of further education and maintain close contact.</p> <p>238 Unless parents do so themselves, a member of staff should always attend parents' evenings to discuss with teaching staff the progress of each child and report back to the young person.</p> <p>239 Staff should also attend social events such as school fairs, sports days and concerts.</p> <p><b>Supporting study</b></p> <p>240 To enable young people to do their homework, homes should provide an appropriate setting and oversight. This requires:</p> <ul style="list-style-type: none"> <li>i. a room without a TV on or other people talking or playing,</li> <li>ii. a table and chair,</li> <li>iii. a quiet environment.</li> </ul> <p>241 Provision of study time and facilities such as reference books should be increased when children are taking public examinations.</p> <p>242 Those carrying on homes should ensure that an appropriate selection of books and other reading material is available. Staff should encourage young people to join their local library.</p> <p><b>Promoting further education</b></p> <p>243 Young people with the ability should be encouraged most strongly to continue their education beyond compulsory school age. The value of education should be emphasised and the merits of making the most of all opportunities for further education and training warmly promoted.</p> <p><b>Supporting children in retaining their first language</b></p> <p>244 If the language or form of language a child has usually spoken with his or her parents or carers is different to the language usually spoken in the home, staff should ensure that the child has the</p> |
|--|---|



opportunity to retain and develop this language in accordance with his or her wishes.

## **EMPLOYMENT AND TRAINING**

245 Regulation 15 of the Children Home Regulations and Small Homes Regulations requires those responsible to assist with the making of, and giving effect to, arrangements for the continued education, training and employment of young people over statutory school age accommodated in the homes.

### **The role of care staff in planning for school leaving**

246 Staff should assist young people in preparing for working life and obtaining suitable training or employment, by helping to make arrangements to give effect to their care plans.

247 They should try to ensure that any employment or training or work experience placement provides a working environment which meets Health and Safety requirements and is legal.

248 Staff must be prepared to give support and encouragement beyond what might normally be given by a caring parent in order to counter the young people's insecurity, low self esteem, lack of self confidence and anxiety about finding a job or training.

249 Staff must help young people think about what they want to do when they leave school, exploring ideas with them and helping them obtain information about as wide a range of education, training or work opportunities as possible.

250 Staff should familiarise themselves with the young person's interests and aptitudes so as to guide her or him effectively in considering the available options.

251 They should be aware of the range of options available and help young people to see the desirability of acquiring the appropriate skills, attitudes and qualifications to increase the likelihood of their obtaining full time employment in the future.

252 Discussions between staff, school and young people, and, where possible, parents, about finding employment should start well before school leaving age is reached.

253 In boarding schools, careers education and guidance should be the joint concern of boarding staff and teachers with special responsibility for this part of the curriculum.

### **The role of staff in preparing young people for work**

254 To help young people who choose work rather than further education staff in homes should have up to date knowledge of local employment prospects. This requires good links with careers

advisers, Job Centres and employment agencies, and the major local employers.

- 255 Staff should be prepared to help with:
- completion of application forms,
  - preparation for interviews so that young people can present themselves to advantage, including arriving in good time, and being appropriately dressed and groomed,
  - responding to requests to accompany young people to interviews with Government agencies.
- 256 In boarding schools, staff should be aware of a broad range of career opportunities and any necessary qualifications
- 257 Staff should be willing to help those who have to adapt to and cope with a new lifestyle as student or worker.
- 258 Staff should also be ready to offer sympathy and caring support to those young people who have to cope with initial disappointment and to adjust their aims if these prove to be unrealistic
- 259 They should be familiar with:
- current procedures for registering for employment,
  - employment schemes,
  - making claims for benefit.

## RELIGIOUS OBSERVANCE

- 260 Special efforts must be made to ensure that important aspects of a child's cultural and religious heritage are not lost at the stage when he or she is admitted to a home.
- 261 Each child is, as far as is practicable, should have an opportunity to attend such religious services and receive such instructions as are appropriate to the religious persuasion to which the child may belong. The regulation also requires that the child be provided with facilities for religious observance for example special diets and clothing
- 262 Enquiries should be made into the religious and cultural background of each child as part of planning the child's admission and settling in. This could include consulting:
- the child's parents,
  - those who looked after him or her previously,
  - people in contact with the child, and
  - the Department.

This information should be recorded in the child's case record.

|   |   |
|---|---|
| <p>263</p> <p>264</p> <p>265</p> <p>266</p>                       | <p>Positive, sensitive steps should be made to provide facilities to allow the child to practise his or her religion in a manner appropriate to his or her age.</p> <ul style="list-style-type: none"><li>• Care staff may be able to give direct assistance depending on their own religious persuasion,</li><li>• it may be necessary to help the child to make contact with a local church or group of adherents to his or her religion,</li><li>• the child's own family should be asked to assist.</li></ul> <p>The Department should also have this information so that staff are aware of matters concerned with religious observance and practice before visits are made.</p> <p>Arrangements may need to be made for special privacy so that a child can pray during the course of the day, or build a small shrine somewhere within the home.</p> <p>These matters must be handled sensitively, both for their potential impact on other children, and to demonstrate to the particular child that consideration is being given to respect for her or his religion.</p>   |
| <b>CATERING ARRANGEMENTS</b>                                      |   |
| <p>267</p> <p>268</p> <p>269</p> <p>270</p> <p>271</p> <p>272</p> | <p>Children in homes should be provided with food in adequate quantities, properly prepared, wholesome and nutritious, and for some reasonable choice to be provided so far as is practicable. Special dietary needs due to health, religious persuasion, racial origin or cultural background must be met.</p> <p>Appropriate equipment, crockery, cutlery and storage facilities etc. must be provided.</p> <p>A varied diet is to be provided and include all the essential nutrients required for normal growth and development. Sufficient food must be provided to enable children to attain or maintain an appropriate height or weight ratio for their age.</p> <p>The menus should incorporate a reasonable choice, within budgetary limits, and take account of the individual needs and preferences of children in the home, and encourage children to try a wide variety of food.</p> <p>Dietary needs may relate to:</p> <ul style="list-style-type: none"><li>• racial, cultural or religious background,</li><li>• physical or other disability, or</li><li>• special dietary needs because of conditions such as diabetes.</li></ul> <p>The part of the home where meals are prepared and cooking is done should as far as possible be like an ordinary domestic kitchen.</p> |

|  |  |
|--|--|
|  | <p>273 Where appropriate, young children should be encouraged to help with the preparation of a meal, or to prepare their own snacks and beverages, under close staff supervision.</p> <p>274 Children should also be involved in the planning of menus where possible, and account taken of their wishes and preferences.</p> <p>275 The person with overall responsibility for the management and delivery of meals should take account of the following operational guidance:</p> <ul style="list-style-type: none"> <li>i. advantage should be taken of the opportunity for social contact which food preparation and meal times present,</li> <li>ii. staff should generally eat with the children,</li> <li>iii. it should be possible for children invite friends or relatives to stay for meals, where appropriate,</li> <li>iv. there should be some flexibility over meal times and patterns, depending on the size and nature of the home. For example, it may be appropriate to vary the times and content of meals according to schools times, weekends and holidays.</li> </ul> <p><b>Menus</b></p> <p>276 The week's menu should be planned and recorded in the menu book in advance. If any dishes are altered, to take advantage of bargains, for instance, the changes must also be noted in the menu book.</p> <p>277 A three or four week menu planning cycle may be more convenient to larger homes.</p> <p>278 Menus should be planned in advance to:</p> <ul style="list-style-type: none"> <li>i. ensure that a balanced variety of dishes is available,</li> <li>ii. provide a sound basis for the ordering of provisions,</li> <li>iii. help in maintaining a record of the food served,</li> <li>iv. assist with the control of costing and budgeting, and</li> <li>v. ensure that proper recipes are available for the particular dishes, especially when catering for more than 10 people.</li> </ul> <p><b>Maintaining the domestic touch in larger homes</b></p> <p>279 Depending on the size and structure of the home, certain limitations and practicalities should be taken into account when operating a large scale kitchen in effectively a domestic environment. Although it is difficult to sustain domestic catering practices when catering for larger numbers (i.e. more than 10 people), the domestic touch should be provided through:</p> <ul style="list-style-type: none"> <li>i. attention to detail in preparation and cooking practices,</li> <li>ii. the creation of interesting tastes and textures, and</li> </ul> |
|--|--|

iii. attention to the appearance of the finished dish.

### **Developing life skills**

- 280 The children should be involved in shopping for food whenever possible, to help them prepare for independent living.
- 281 Where the kitchen layout is domestic in style, it should also be possible for children to participate in the preparation of a meal.
- 282 In large homes this may not be possible, particularly where there is a central main kitchen. Small kitchen areas, equipped with ordinary domestic cookers and washing up facilities should, therefore, be provided near to a dining or sitting area, to allow the children to prepare their own food, snacks and beverages, under the supervision of care staff where appropriate.

### **Hygiene and staff training**

- 283 The person carrying on the home must ensure that adequate practices and procedures are established and maintained so as to minimise the risk of illness (whether food or non-food related) and accidents. These should include procedures for containing and eventually terminating any outbreak of illness, whether or not food-related.
- 284 Any outbreak of illness, food-related illness in particular, must be notified to the person carrying on the home by who ever is in charge as soon as possible.
- 285 Depending on the particular circumstances, it may also be appropriate to:
- notify the local Environmental Health Officer,
  - keep food samples,
  - contain and eventually terminate any outbreak of illness, particularly where this is, or is thought to be, food related.
- 286 All staff involved in the preparation and service of food within the home should undergo periodic training in safe hygienic practices and good food handling techniques.
- 287 Food hygiene training should be monitored and regularly reviewed.
- 288 The design, layout, equipment, working practices and procedures of kitchens and meal service areas must be of sufficient standard to satisfy Food Hygiene and Food Safety legislation, as well as conforming to the Health and Safety at Work Act 1977 and any other statutory requirements.
- 289 All staff and, where appropriate children should be aware of the requirements of the legislation and the procedures to be followed.

## **PROVISION OF CLOTHING AND PERSONAL**

## REQUISITES

- 290 Children should be well clothed. The children should be enabled to purchase clothes according to their needs. If a child is not able or does not wish to buy his or her own clothes are to be purchased for him or her.
- 291 The purchase of clothes should be done on an individual basis through normal shopping arrangements, and regarded as an opportunity for children looked after to learn to make choices.
- 292 Bulk buying or special purchasing arrangements are not appropriate except for school uniforms or sports kit.
- 293 Children should have access to the normal range of toiletries, cosmetics and sanitary protection and should be entitled to exercise their own preferences.
- 294 Younger children should be taken shopping, preferably singly or in pairs, so that they can receive the fullest attention from the care staff in guiding them in making choices. Any difficulty in doing this should not be avoided by imposing a predetermined selection on the child.
- 295 Older children may prefer to do their own shopping without care staff present. Where appropriate they should be offered the opportunity to be accompanied. In any case care staff should facilitate discussion of the proposed purchases in advance to help the child clarify his or her ideas and to be aware of the spending limits.
- 296 Care staff should fully understand the significance of a child's religious, cultural and racial background for his or her choice of clothing and other personal requisites. For example, a Muslim girl may be expected to cover her legs with leggings or trousers. Specific enquiries may need to be made of parents or previous carers.
- 297 Care staff should be aware of the special needs of black children in relation to their hair and skin care. The children should be assisted to purchase the appropriate preparations.
- 298 Children should be allowed to make spontaneous purchases out of their pocket money.
- 299 Normal everyday methods of making payment should be used in shops, i.e. cash, cheque, credit or debit card. Order books should not be used because they stigmatise the child and restrict choice to specific shops. Where major items are being purchased it may be preferable for a staff member to accompany an older child to write a cheque rather than take unnecessary risks in carrying large sums of money.

|  |  |
|--|--|
|  | <p>300 Where appropriate, clothing allowances should be paid into individual post office accounts from which children can make withdrawals under the degree of supervision considered appropriate in each case.</p> <p>301 Girls should be allowed to keep their own supply of sanitary requisites. It is not acceptable for such items to be handed out singly when needed. Girls should not have to approach male care workers to request sanitary protection.</p> <p><b>FIRE PRECAUTIONS</b></p> <p>302 The home is required to notify certain particulars to their local fire authority.</p> <p>303 They must provide adequate fire precautions, prevention, equipment, fire drill arrangements. Staff and residents must be made aware of fire procedures. Where a fire causes the evacuation the person in charge is required to notify the Department.</p>  |
| <p>Regulation 12, and Schedule 2, Children's Homes Regulations 2002 and Small Homes Regulations 2004</p> | <p><b>RECORDS ON CHILDREN</b></p> <p><b>Requirements</b></p> <p>304 A written case record on each child accommodated in any home governed by Regulations must be kept<br/>see also Chapter 2 p.88 onwards.</p> <p>305 A comprehensive list of the information which should be included in the record is specified in Schedule 2 of the Regulations</p> <p>306 The home also needs information on the child. Much of the material this contains will duplicate that held as required under the Placement of Children (General) Regulations (Regulation 8), but it will be more detailed and personal to the child.</p> <p>307 Homes are also required to maintain a register of all the children placed with them by the Department.</p> <p>The information to be recorded is given in Regulation 10(2), Placement of Children (General) Regulations 2002.</p> <p><b>Recording information on the child's file</b></p> <p>308 Written entries in the case record should be signed and dated and the name of the signatory clearly identified.</p> <p>309 Those making entries must adhere to professional standards:</p> <ol style="list-style-type: none"> <li>a. information should be factual, accurate and clear,</li> <li>b. fact should be separated from opinion, but it is helpful for staffs' judgement to be recorded,</li> <li>c. the record should not include:             <ol style="list-style-type: none"> <li>i. gratuitous value judgements or</li> </ol> </li> </ol> |

ii. stigmatising descriptive terms such as "delinquent", "maladjusted" or "uncontrollable", which carry the risk of "labelling" that child.

d. when colloquialisms are the most apt description in the circumstances, they should either be reported as speech or clearly indicated by inverted commas.

### **The importance of the file to the child**

310 The file should be treated as a significant and positive feature of the child's life. He or she should have access to it, and be encouraged to contribute to the record. For a child who does not have access to parents' recollections it may become his or her "memory".

311 A child of sufficient understanding should be allowed regular access to the file consistent with its safe keeping and his or her best interests and in accordance with the Department's policy.

312 He or she should read or be told what has been recorded, unless knowledge of the material will cause harm to the child or to a third party.

313 He or she should be encouraged to record his or her own observations including any disagreement about an entry in the file.

314 The information in the homes file for each child must be kept safe and passed on with the child when he or she moves on. How this is done will depend on the child's destination. Different components of the file may be passed on to different locations for safe keeping.

315 If a child goes into the penal system it will be best for the Department to hold the whole file on the child's behalf until he is released.

316 The person in charge of the home should ensure that precise information is recorded as to where the file, or components of the record, have been transferred.

317 If the home needs to hold information to which a child cannot have access, this must be held in a separate part of the file and clearly marked as confidential to staff. If it is of a highly sensitive nature consideration, should be given to holding it in a separate place.

### **The importance of the file to staff**

318 The child's file should be used as a tool for assembling and presenting information, so that planning meetings can be based on sound documented information.

### **Safe-keeping of records**

319 The Regulations require that children's records should be kept for at least 75 years from the birth of the child or, if less, for 15 years after the child's death.



|  |   |
|--|---|
|  | <p>320 Regulation 23 requires that the person carrying on the home shall allow the child's representative under Section 96 of the Children and Young Persons Act 2001 access to records.</p> <p><b>Records on homes</b></p> <p>321 Each home is required to maintain the following up to date records:</p> <ul style="list-style-type: none"><li>a. the dates on which each child arrived and left,</li><li>b. where each child came from and went to,</li><li>c. the identity of the organisation or person responsible for placing the child in the home,</li><li>d. which children were being looked after, or were in care, under what legal authority.</li></ul> <p>322 Information about the following:</p> <ul style="list-style-type: none"><li>a. the staff employed,</li><li>b. people resident at the home, apart from the children and staff,</li><li>c. accidents,</li><li>d. medicines administered to children,</li><li>e. fire drills and fire alarm tests,</li><li>f. money deposited by children for safekeeping,</li><li>g. valuables deposited by children,</li><li>h. records of all accounts kept in the home,</li><li>i. a record of menus,</li><li>j. every disciplinary measure imposed,</li><li>k. daily rosters, and</li><li>l. a daily log of events at the home, including the names of visitors to children.</li></ul> <p>323 These records must be kept for at least fifteen years except for menus, which only have to be kept for one year.</p> <p>324 Entries should be made in appropriate language, and record the actions of staff as well as children. They should be signed and dated, and the name of the signatory should be clearly identifiable.</p> <p><b>Regulations and Guidance</b></p> <p>325 A copy of the Children's Homes Regulations or Small Homes Regulations (as appropriate) and associated guidance (including this Volume) is required to be kept in each home and made available to staff, children, parents etc.</p> <p>326 The main features of the regulations may be explained in language appropriate to their age and understanding to people who have</p> |
|--|---|

difficulty in reading.

### **Notification of significant events**

327 Certain significant events must be notified by the home to the people most likely to be concerned, including a child's parents, the Department, and the agency paying for the placement. The events are:

- a. the death of a child,
- b. inappropriate conduct by a staff member which suggests that he or she may not be a suitable person to work with children,
- c. serious harm, including child abuse,

Guidance about child abuse is given on p.50 onwards.

- d. a serious accident involving a child,
- e. the serious illness of a child,
- f. an allegation a child has committed a serious offence,
- g. involvement or suspected involvement of a child in prostitution,
- h. a serious incident resulting in calling the police to the home,
- i. any absconding of the child,
- j. the outbreak of a notifiable infectious disease,
- k. Absence of child without authority.

328 Each home must provide all staff and children with a written procedure to be followed when a child is absent without permission.

329 The main features of the procedure should be explained in language appropriate to their age and understanding to very young children and young people who have difficulty reading.

### **Change of person in charge**

330 The person in charge of a registered home is required to notify the Department one month in advance (wherever practicable) of any anticipated change of the person in charge.

Schedule 4 lists the information to be notified

## **ACCOUNTABILITY AND VISITING ON BEHALF OF THE DEPARTMENT**

331 Each children's home must be inspected from time to time by the Department, by someone who does not work there.

332 An important purpose of the visits is to ensure that the day to day conduct of the home is seen by someone not involved in its operation, who can provide a report to the Department.

- 333 Visits should be unannounced, and reports of visits should be seen by the Department without amendment or deletion.
- 334 Those carrying out inspections must always:
- a. be given opportunity for private conversation with any child, other family member, or staff member who requests it, and
  - b. report on their observations of the children.
- 335 Children accommodated in children's homes must also be visited by the Department from time to time in the interest of their welfare.

### **APPLICATION FOR REGISTRATION AS A REGISTERED CHILDREN'S HOME**

- 336 The Children and Young Person Act 2001 deals with the registration of children's homes, including:
- a. application for registration, and the information required,
  - b. limits on the numbers of children that may be accommodated,
  - c. other conditions of registration (other than number),
  - d. variation of conditions of registration, and
  - e. cancellation of registration

Registration continues until it is removed.

- 337 The Department may cancel the registration of a children's home.
- 338 It is an offence to carry on an unregistered children's home without reasonable excuse. A fine not exceeding £5,000 may be imposed on summary conviction of caring for and accommodating a child in a children's home which is not registered.

Small Homes do not require registration.

### **Checks on registrations**

- 339 When staff place a child in a children's home on the Island they should check that the home is registered with the Department.
- 340 If the home is off the Island staff should check that it is registered with the relevant authority.
- 341 The Department should ensure that it is well informed about the practice of the home in which it intends to place a child before doing so, consulting any published reports.
- 342 The same considerations apply to:
- a. residential placements in schools,
  - b. nursing homes, and
  - c. residential care homes.
- 343 Sources of information might include:

- a. *for schools:* reports by the Department of Education, or by a Social Services Department as a result of their duties under Section 87 of the Children Act 1989, and by the Schools Inspectorate.
- b. *for nursing homes:* reports by health authorities.

## **CHILD ABUSE IN HOMES**

- 344 Staff in homes have a key role in identifying child abuse and in bringing it to the attention of appropriate people.
- 345 The Department must ensure that:
- a. each home has clear policies and written procedures for responding to abuse,
  - b. they are integrated with local procedures agreed by the Child Protection Committee,
  - c. staff have adequate training in recognising abuse and in the home's procedures,
  - d. staff in homes have routine links with other agencies concerned with child protection - the Department, schools, hospitals, GPs and others. They should not work in isolation from other agencies.
- 346 Whenever staff in a home receive evidence that a child is suffering or has suffered abuse, they have no choice but to pass it on to a person with the authority to investigate and evaluate it. This normally means informing the Department, who will involve other agencies as necessary.

### **Policy and procedures**

- 347 The home's written guidance for staff should:
- a. describe the sort of circumstances in which referral could and should be made, and
  - b. identify exactly to whom referral should be made.
- 348 Whatever the circumstances:
- a. the first priority is to protect the child, and
  - b. then to set in motion the action described above.
- 349 Every home should have a copy of the procedural guidance, agreed by the IOM Child Protection Committee, on what staff should do when they receive possible evidence of child abuse.

Guidance on the duties of agencies in investigating child abuse is given in *Working Together to Safeguard Children. A guide to inter-agency working to safeguard and promote the welfare of children* (The Stationery Office, 1999, ISBN 011 322309 9). A copy should be kept in every children's

home.

- 350 The Department should play an active part in:
- a. promoting the development of child protection policies in residential settings,
  - b. ensuring that there is adequate continuing training for residential staff, and
  - c. ensuring that staff are aware of the specialists they can turn to for advice or as a first contact in times of crisis.

### **Disclosure and the limits to confidentiality**

351 Staff must understand that it is not possible to give children absolute guarantees of confidentiality, if they seek to disclose, in confidence, that they have been abused.

- 352 Absolute confidentiality is not possible because:
- a. it can put staff in the untenable position of being unable to report a crime, and
  - b. it may make it impossible for the child to be protected from further abuse.

### **Professional guidance**

- 353 Good child care practice:
- a. resists being drawn into secretive and collusive relationships with children,
  - b. builds a relationship which enables children to trust staff to do the best thing with a disclosure of abuse, so the child can safely believe that:
    - i. his or her wishes about what should happen are taken into account, and
    - ii. the consequences of disclosure will not make matters worse.
- 354 To help staff feel confident about the reassurances that they can give to children, those in charge of homes should ensure that they are:
- a. fully up to date with local practice and procedures, and
  - b. know what to do if they believe insufficient action has been taken over a suspicion or allegation of abuse.

### **Abuse of children by staff**

- 355 The following people should be informed:
- a. the Department,
  - b. any other care authorities using the home,
  - c. the police, and
  - d. those with parental responsibility for children in the home.

The fullest possible co-operation with the investigating authorities is in the best interests of the children and the home.

### **Staff concerns**

- 356 What has been said above about staff also applies to this situation.
- 357 When necessary, junior staff should be encouraged to share their concerns about senior staff with the Department.
- 358 Staff should be reassured that sharing concerns is the right thing to do:
- a. A policy and procedures for whistle blowing should be included in the guidance to staff, and
  - b. be dealt with in training and supervision.

### **Action to be taken with the staff member concerned**

- 359 The first step should be to suspend the staff member from duty on the grounds of:
- a. the possibility of the alleged abuse recurring, or
  - b. concern that his or her presence might interfere with the investigation
- 360 The staff member concerned should be advised to seek advice on protecting his or her interests in relation to criminal and disciplinary investigations and proceedings.
- 361 When a staff member is alleged to have abused a child three strands of investigation should be pursued to a conclusion. They are child protection enquiries, police investigation into a possible offence, and disciplinary proceedings.

### **Child protection procedures**

- 362 The inter-departmental and inter-agency child protection investigation is described in the I.O.M Child Protection Committee's Child Protection Procedures. A copy should be available to all staff in every home. Steps should be taken to ensure everyone reads and understands them, and is able to act on them.

### **Police investigation**

- 363 In order to prosecute, there must be sufficient evidence to support a case that an offence has been committed beyond reasonable doubt. Insufficient evidence does not mean that there is no need to take steps to protect the child, or that the member of staff concerned should not face disciplinary proceedings.

### **Disciplinary procedures**

- 364 The primary purpose of instigating the disciplinary procedures is to discover whether or not the staff member has been guilty of misconduct or gross misconduct in the course of his duties as an

|  |   |
|--|---|
|  | <p>employee.</p> <p>365 The employer should also consider performance in other matters important to good practice and management intended to support good child care. This might include carrying out procedures, making proper records, and reporting incidents to others.</p> <p>366 The employer should also review recruitment and supervision practice in general and in relation to the particular staff member.</p> <p>367 The common facts of the alleged abuse should be applied independently to each of the three strands of investigation. A definite conclusion should be reached to each one. The outcome of one may have a bearing on another.</p> <p><b>Training</b></p> <p>368 All staff in homes, including agency staff, should receive induction and initial training in the recognition of child abuse and the procedures for reporting it.</p> <p>369 Staff should also receive follow up training which is:</p> <ul style="list-style-type: none"> <li>a. appropriate to the aims and objectives of the home, and</li> <li>b. closely linked in with the training initiatives of the I.O.M. Child Protection Committee.</li> </ul> <p>370 Training can usefully be undertaken separately and jointly with other staff engaged in similar work.</p> <p><b>Support for staff working with abused children</b></p> <p>371 Staff caring for children who have been sexually abused should be made aware of its affect on child-adult relationships, so that they can take account of this in the way they respond.</p> <p>372 Staff should receive:</p> <ul style="list-style-type: none"> <li>a. specific training, and</li> <li>b. supportive professional supervision.</li> </ul> <p>373 Responsible authorities and managers should also consider the need for external consultancy for staff caring for children who have been abused, especially in particularly serious and complex cases.</p> <p><b>Abuse of one child by another</b></p> <p>Abuse should be reported in every case.</p> <p>374 When one child in a home abuses another child, a very clear distinction needs to be made between:</p> <ul style="list-style-type: none"> <li>a. behaviour which amounts to serious physical assault, intimidation and sexual assault and requires external child protection intervention and possibly criminal investigation, and</li> <li>b. normal childhood behaviour or sexual exploration, which</li> </ul> |
|--|---|

|  |   |
|--|---|
|  | <p style="text-align: center;">should be dealt with by care staff.</p> <p>375 Training and written guidance should address the boundaries between behaviour which can be regarded as "normal", and behaviour which cannot. Continuing professional discussion is important to re-affirm what is normal behaviour. Bullying and intimidation, for example, should be addressed.</p> <p>376 A child in home has the same rights to protection by the police and care agencies as any child.</p> <p>377 Disclosure requires sensitive handling. Reporting abuse may have implications for all the children in the home, especially if other children have been abused by the same child but not reported it out of guilt or fear.</p> <p>378 Those with parental responsibility for the children affected should be informed and involved in discussions about handling the situation.</p> <p>379 Staff in the children's home should co-operate fully with external investigators so that:</p> <ul style="list-style-type: none"> <li>a. the full extent of the abuse is discovered,</li> <li>b. the children receive proper counselling, and</li> <li>c. the implications of the incident(s) for the future plans of each child can be considered systematically.</li> </ul> <p>380 Supervisory or managerial support is necessary so that:</p> <ul style="list-style-type: none"> <li>a. staff avoid defensiveness and deal effectively with the process, and</li> <li>b. the precipitate removal of children, which may not be in their long term interests, is also avoided.</li> </ul> |
|--|---|