Referrals, Placements and Admissions

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Regulations and Standards:

The Children's Homes (England) Regulations 2015:

- Regulation 6 - The Quality and Purpose of Care Standard
- Regulation 14 - The Care Planning Standard **Contents:**

1. Planned Placements:

HND Children's Care Ltd would like all placements to be on a planned basis, but this is not always possible as HND Children's Care Ltd homes do take emergency referrals and admissions as stated in each of HND Children's Care Ltd homes statement of purposes.

Ideally, prior to moving in, a child should have introductory visits. These pre-placement visits should enable the child to meet other residents and staff and the key worker, thus enabling them to become more familiar with the new situation and environment.

At the pre-placement visit the placement plan should be discussed in an appropriate way, depending on the understanding, of the child. This is to ensure the needs of the child are met from the outset.

All required documentation, Essential Information, Placement Agreement or Copy of Care Order, Original Interim Care Order, Birth Certificate, Placement Plan / abilities and goals,

and Care Plan should be available prior to commencement of the placement or must be provided within two weeks of the beginning of the placement.
Furthermore, a placement planning meeting should ideally be held pre-admission, and at the maximum, 72 hours after admission – this is essential to ensure that care planning is accurate, thorough and agreed.

2. Moving in and Out of Placements:

2.1 Pre-Admission:

The following are some of the key tasks and considerations that accompany this stage:
- The HND Children's Care Ltd staff team should receive and make themselves familiar with basic information concerning the child and the reason why he or she is moving into the home, this MUST be inclusive of any know or presumed risk behaviours / safeguarding issues.
- The homes manager **MUST** complete an impact risk assessment to ensure the placement is suitable and can be managed safety and appropriately.
- The home's manager or child's keyworker should liaise with the new child's Social Worker, Parents (if appropriate), previous residential homes, other related professionals etc. to learn about the child, their risks, their needs and proven care and risk management strategies; all prior to admission.
- The impending admission of a new child will inevitably provoke feelings for both the staff team and the children's group. It is therefore important to facilitate discussion for the staff team to express and address their feelings, especially in relation to any anxieties they may have. Once staff have addressed their feelings, they will be more able to help the children's group deal with their feelings about the new admission. It is crucially important for staff not to project any negative feelings they may have about an impending admission onto the children.
- The existing children (if any) should be involved as much as possible with the imminent move of the new person into the home, in ways that do not compromise confidentiality. So, for instance, within the children's meeting or over a mealtime might be an ideal place to talk about the ways the first evening / weekend could be made special. A 'buddy type' or 'peer support' system could be established in order to link the new child with one of their peers in order to gain extra support in the first few days and weeks.
- A key worker needs to be identified for the child. It is important that children are consulted about their choice of key worker (*Regulation 5 - The children's views, wishes and feelings standard*). Clearly, at this stage their knowledge of the staff team will be limited but children can be asked about their preferences, for instance in terms of gender. A system can also be in place that enables key workers to be changed under certain circumstances. The details of which will need to be worked out in teams and children should be consulted about this. See *'Key Worker Guidance Policy'.*
- Contact and visits need to be made to the child and the process of involvement in the Placement Plan also needs to begin. It is important that children are consulted about some of their basic care needs such as what food they like and what activities they enjoy. The

depth at which the initial meeting goes will vary from individual to individual and therefore thoughtful planning that addresses the individuality of the child needs to be part of the process from the outset. It must also be remembered, however, that on first meeting, staff should let the child lead in terms of the level and pace at which they engage.

- The child and, where appropriate family members / carers, is enabled to visit the home prior to admission. This is another opportunity for imparting information but because the whole process can be overwhelming, written information that can be taken away and read, such as the children's / young person's guide, may be particularly helpful. This is not the only opportunity to give and receive information; it is just the beginning. What is most important is that a sense of welcome is conveyed to the child and their family and / or carers.

This is also the time for developing clear and more concrete agreements and arrangements with the social worker about the Care and Placement Plans and who needs to do what to ensure the Plans will work in practice. It is also important at this stage to anticipate any trouble spots and how these will be responded to. For instance, if contact arrangements begin to falter, who will pick up the issues in the first instance or will the social worker and key worker engage in joint work to resolve issues?

It may also be the most opportune time to begin building relationships with colleagues from other agencies. If, for instance, the child is attending a school that is new to the home, an early introduction can smooth the transition and enable a proactive response to any issues that may occur.

2.2 Admission:

Time and space are an important requirement for the new child and for the current group of children. It is therefore useful to consider the following:

- To rota the keyworker on duty at this crucial time
- If the new child presents particular challenges, it may be useful to arrange for the existing group to have a special outing. Thus, allowing more space and time for the new child to find their way around their new home, whilst at the same time, paying particular attention to the existing group and giving time for sensitising them to the new situation. These kinds of arrangements do require careful planning, but this must be balanced against the possible gains.
- Special attention needs to be given to the new child's bedroom, ensuring that it looks welcoming but free to be personalised (perhaps a new duvet cover and a poster that he or she has picked prior to moving in)
- Bedtime can be a particularly anxious time, and again some thought and involvement of the child in how to ease this time is important throughout the whole of residential life but particularly when first moving in
- Attention also to the first mealtimes and how the child relates to food. If appropriate, maybe their favourite meal could be catered for

The process of Placement Planning continues. As the child begins to settle in and develop

relationships, more in-depth involvement in addressing the Care and Placement Plan should also develop. Particular issues will need to be faced and involving the child in a 'solution focused' way is more likely to have positive results. For instance, if the young person has a particular issue with drug use, naming the issue and exploring with them ways in which this issue might be addressed. At the same time, the appropriate boundaries on acceptable behaviour will also have to be named and set.

2.3 Discharge:

Also see: 'Preparation for Leaving Care Policy'.

How children leave the home is equally as important as when they move in, and it will provoke a range of feelings for all concerned just as the move into the home did. Therefore, the same consideration needs to be given to staff feelings about the move before staff address the feelings for the young person and the rest of the resident group.

Hopefully, the child is moving in line with their Care and Placement Plan, occasionally; however, it may be a move that was not part of the original plan. But whatever the reason, it is important that the child leaves the home in as positive a way as possible. If he or she is leaving the home in an unplanned way, resulting out of negative behaviour, it is particularly important to 'draw a line' at this point and to help the child move with as much support and positive messages as possible.

When children are leaving the home to live independently, it is important to remember that this is not a one-off event but part of a process. Helping children approach independence needs to be part of the whole philosophy and practice of the home. The necessary skills and confidence are gained over time and should not be seen to begin when the child reaches 16 years of age.

It is therefore imperative for those residential homes that work with children up to independence, to build, develop and sustain positive relationships with leaving care services, housing providers and any other resources and support systems available.

As with the move into one of our HND Children's Care Ltd residential homes, the move out should also involve communication and visits between the home and the new setting. What works best will differ from situation to situation and the child's needs to be consulted about what they feel would work best for them. For instance, if the move is to a foster placement, it might work well for the new carer(s) to be introduced to the child at the residential home.

This would place the child at the advantage of meeting a new career on their territory. It is important whatever the arrangements, however, that the message to the child is that everyone supports the move and is working together to ensure that it is as positive as possible.

Just as the move into the home was made special, so too the move out warrants some kind

of ceremony. This may be a party or meal at the home or a special trip out and a farewell gift. Clearly the child and resident group need to be involved in any decisions, preparations and planning of special events.

Finally, no child should be arriving or leaving with their belongings in a black plastic bag! All children are to be supplied with a suitcase/ hold all for their belongings.

2.4 Delegated Authority

It is essential that 'Delegated Authority' is provided by the placing authority, and / or those with parental responsibility at the point of admission of any child. 'Delegated 'Authority' is the process that enables HND Children's Care Ltd staff to make common sense, everyday decisions about the children in our care, such as allowing them to go to friends' houses for sleepovers, signing consent forms for school trips arranging health care etc.

It is important to note that all HND Children's Care Ltd staff have a duty to work in the child's best interest at all times.

Despite any 'Delegated Authority' being provided, there may be times where additional consent is sought from either the local authority, or those with parental responsibility depending upon risks presented by children, or simple transparency of care.

'Delegated Authority' should be signed all appropriate persons, alongside all consent forms required (see 'Consents Policy')

End.