Statement of Purpose

Andaman Residential Ltd

 At Andaman House, we believe every young person deserves a safe, nurturing place to heal, grow, and thrive. We are committed to providing compassionate, trauma-informed care that empowers children and young people to build resilience, discover their strengths, and achieve their full potential.

Statement of Purpose

Andaman House

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Quality and Purpose of Care

# 1. **A statement of the range of needs of the children for whom it is intended that the children’s home is to provide care and accommodation.**

Andaman Hous**e** provides integrated residential care for children and young people aged 4 to 18 who present with complex emotional and behavioural difficulties (EBD). The home can accommodate up to four young people at a time, offering a safe, consistent, and nurturing environment. While Andaman House does not accept new placements for individuals over the age of 18, any child placed prior to this age may continue their stay until they turn 18 to ensure stability and continuity of care. Our children’s home provides care and accommodation for children aged 4-18 years old who may have experienced trauma, abuse, neglect, or family breakdown. We support children with emotional and behavioural needs, including those affected by attachment difficulties and mild to moderate mental health challenges. The home is not designed to accommodate children whose primary needs involve complex physical disabilities requiring full-time medical care or those whose behaviours pose significant risks that exceed our capacity to manage safely.

**Aims and Objectives**

**The core aim of the Home is to support children in overcoming adverse experiences and achieving their full potential in a safe and structured environment.**

**Specific objectives include:**

* Providing high-quality residential care that meets individual needs.
* Supporting children’s emotional well-being and mental health.
* Promoting positive relationships and reducing harmful behaviours.
* Encouraging educational attainment and school attendance.
* Facilitating life skills, independence, and preparation for adulthood.
* Promoting healthy lifestyles and physical well-being.
* Upholding children’s rights, voice, and participation.
* A safe, stable, and nurturing environment.
* Individualised care plans that address each child’s emotional, educational, and developmental needs.
* Therapeutic support that promotes healing, resilience, and a positive sense of identity.
* Opportunities to engage in education, develop life skills, and prepare for independence or family reunification, where appropriate.
* We value diversity, inclusion, and respect for each child’s cultural background and identity. Our team collaborates closely with families, professionals, and external agencies to ensure that every child receives the support they need to thrive.
* Our objectives are regularly reviewed with the child, their social worker, and other relevant professionals to ensure they remain relevant, ambitious, and achievable.

**A Nurturing, Structured Home**

Andaman House is a homely, caring, and structured environment where young people are supported by a dedicated and trained care team. Each child receives daily individualised support and works alongside staff to create a personalised care plan, which focuses on their emotional, social, behavioural, and educational development.

Children are encouraged to follow their own routines and care plans within a setting that maintains high expectations, celebrates individuality, and promotes positive achievements. Our overall goal is to create the conditions necessary for each young person to reach their full potential and develop the skills required for a fulfilling, independent life.

**Understanding and Meeting Complex Needs**

The children who come to Andaman House often face multiple disadvantages, which may include:

* Low emotional well-being and/or mental health needs
* Disrupted attachment and experiences of trauma
* Social isolation or difficulty forming relationships
* Disengagement from education
* Risk of exploitation or challenging behaviour patterns

Our experienced team works to build trusting relationships, support re-engagement with learning, and provide emotional regulation strategies that help children to feel safe and in control.

**Daily Routines and Supportive Care**

At Andaman House, we help children develop healthy routines that support their overall wellbeing. This includes:

* Bedtime routines that are age-appropriate and support restful sleep
* Healthy eating guidance and nutritious meal options
* Support with personal care, hygiene, and life skills
* Encouragement and re-engagement with education and learning goals

**Relational and Individualised Practice**

There is a strong emphasis on building secure, consistent relationships between children and their key workers and wider care team. This enables children to:

* Feel safe to test boundaries within a structure of consistent expectations
* Develop trust and build resilience
* Be supported through individual behaviour support plans and care plans tailored to their specific needs

All care planning takes into account each child’s:

* Gender, religion, racial and cultural background
* Language needs, identity, disabilities, and previous experiences

Plans are developed in partnership with the child, the care team, and relevant professionals, ensuring a child-centred and inclusive approach.

**Multi-Agency Support and Progress Monitoring**

Children’s progress is regularly reviewed and monitored, with:

* Close involvement from the care team, professionals, and the child themselves
* Multi-agency decision-making that ensures the child’s best interests remain central
* Ongoing evaluation to improve support and outcomes

**A Place to Heal and Grow**

Andaman House is committed to providing a stable, nurturing, and therapeutic environment where children can:

* Recover from trauma
* Rediscover their self-worth
* Be supported to achieve emotional stability, relational security, and long-term personal development

We aim to give every child the opportunity to heal, grow, and thrive in a place where they are truly valued for who they are.

 Ethos and mission

2. The home’s ethos, the outcomes that the home seeks to achieve and our approach to achieving them.

Our Ethos
At Andaman House, we believe every young person deserves a safe, nurturing place to heal, grow, and thrive. We are committed to providing compassionate, trauma-informed care that empowers children and young people to build resilience, discover their strengths, and achieve their full potential.
We respect each child’s individuality and journey, fostering a sense of belonging, hope, and confidence. Through consistent support, positive role modelling, and partnership with families and professionals, we prepare young people for a successful future while maintaining an open door for ongoing care and connection. The ethos of the Home is rooted in the belief that every child, regardless of their past experiences, has the potential to heal and lead a fulfilling life. Our approach is holistic, therapeutic, and underpinned by values of respect, empathy, inclusion, and empowerment. Our philosophy is grounded in trauma-informed practice, attachment theory, and child development principles. We recognise that challenging behaviours are often expressions of unmet needs or past trauma, and we seek to respond with curiosity, compassion, and consistent boundaries.

# Our Care Approach

# We take a trauma-informed, child-focused approach rooted in therapeutic principles, structured routines, and positive reinforcement. Every child benefit from an individualised care plan shaped by their voice, needs, and aspirations. We support children through consistent routines, clear boundaries, and nurturing relationships. Staff are not only support workers, but mentors and role models — demonstrating positive behaviour, healthy relationships, and emotional regulation. Through consistent support and strong, trusting relationships with staff, children are guided to build the skills, self-belief, and coping strategies they need for long-term success. Our team works closely with families, social workers, schools, and other professionals to provide comprehensive support and ensure that progress is both sustainable and meaningful.

.We also partner with external organisations to deliver targeted workshops on key safeguarding issues such as exploitation, grooming, first aid, substance misuse, and healthy relationships. These preventative sessions equip young people with the knowledge and confidence to make informed decisions and recognise risks.

We provide a trauma-informed sensory and therapy room — a calm, safe space equipped with sensory tools and resources designed to help young people regulate their emotions, manage anxiety, and process trauma. This room is facilitated by trained trauma-informed wellbeing practitioner for 1:1 sessions or keyworkers, who use it to deliver personalised therapeutic support tailored to each young person’s needs.

Accommodation offered

# **A description of the accommodation offered by the home, including:(a) how accommodation has been adapted to the needs of children;(b) the age range, number and sex of children for whom it is intended that accommodation is to be provided; and(c) the type of accommodation, including sleeping accommodation.**

Our home provides a warm, safe, and supportive environment where children can feel secure and thrive. The accommodation is carefully designed to meet the everyday needs of young people, supporting their emotional well-being, development, and sense of ownership. The balance of private and communal space fosters both independence and positive social interaction.

1. **Adaptation of Accommodation**

The home is child-friendly, thoughtfully furnished, and adaptable to individual needs. Safety and comfort are prioritised throughout, with décor and layout carefully designed to reduce anxiety and promote a sense of calm. Where required, adaptations are made to meet specific emotional, sensory, or developmental needs—these may include sensory-friendly spaces, visual cues, and personalised bedrooms. Children are actively encouraged to help shape their own spaces, supporting their identity, autonomy, and emotional well-being.

**(b) Age Range, Number, and Gender of Children**

The home provides accommodation for up to four children, aged 4 to 18, who have emotional and behavioural difficulties. All placements are made following thorough compatibility assessments, including risk assessments and consideration of the dynamics of the existing group. The home is registered for mixed-gender placements, guided by the needs and best interests of each child as outlined in their individual care plan.

**(c) Type of Accommodation and Sleeping Arrangements**

Each child is provided with their own private, lockable bedroom, which includes a comfortable bed, ample storage, a television, and space for personal belongings and decoration.

**Communal areas include:**

* A shared lounge
* A fully equipped kitchen and dining area
* A shared bathroom with both a shower and a bath
* A private garden or outdoor space for recreation and well-being
* Quiet zones for reading, reflection, or emotional regulation
* A dedicated study area for homework and educational support

All rooms are arranged and furnished to promote privacy, dignity, and emotional safety. Communal living spaces are designed to support positive peer interaction, encourage the development of life skills, and establish healthy routines. Clear boundaries and appropriate adult supervision are maintained at all times, while fostering a warm, family-oriented environment.

**(b) Age Range, Number, and Gender of Children**
The home provides accommodation for up to 4children with emotional, behavioural difficulties aged 4 to 18. Placements are made with careful consideration of compatibility, risk assessments, and the group's needs. The home is registered to accommodate mixed genderbased on the needs identified in each child’s care plan.

**(c) Type of Accommodation and Sleeping Arrangements**
Each child has their own private, lockable bedroom, equipped with a comfortable bed, storage space, TV and areas for personal items and decoration.

**Shared areas include:**

* A communal lounge
* A fully equipped kitchen and dining space
* Shared bathroom with both a shower and bath
* A private garden or outdoor area for recreation and well-being
* Quiet zones for reflection, reading, or emotional regulation
* Dedicated study space for homework or education support

The layout and furnishing of rooms are designed to promote privacy, dignity, and emotional safety. Communal living areas are designed to foster appropriate peer interaction, promote life skills development, and encourage healthy routines while maintaining clear boundaries and ensuring adult supervision whilst being family orientated

**(Add a photo of the home)**

Location of the home

# **A description of the location of the home.**

The home is situated in Fishponds, Bristol within a safe and stable residential neighbourhood that offers a strong sense of community. The location has been carefully selected to provide children with both security and access to essential services and opportunities for personal growth and development. We benefit from:

* Proximity to a range of schools, including both mainstream and specialist settings, supporting flexible, individualised education pathways.
* Easy access to healthcare services, including GPs, dentists, CAMHS, and other therapeutic or specialist providers.
* Strong public transport links that facilitate school attendance, family contact, and wider community engagement.
* A variety of local amenities, such as parks, libraries, youth services, and leisure centres, promote healthy, active lifestyles.
* Good location for extracurricular clubs including Brownies, Cubs, Boxing, Gyms, Cadets, swimming lessons, karate and many more opportunities.

This setting enables us to offer children safe and meaningful opportunities to engage with their community, maintain or rebuild family relationships where appropriate, and participate in everyday experiences that build resilience, independence, and a sense of belonging. Our location provides consistent, high-quality care that aligns with placement priorities for stability, accessibility, and child development.

 Safeguarding and Child Protection

* 1. **Safeguarding and Child Protection**

Safeguarding is a core principle embedded in every aspect of our practice. The safety, welfare, and protection of children in our care is our highest priority. We are committed to creating and maintaining a secure, transparent, and vigilant environment where all children feel safe, protected, and listened to.

We operate in line with Working Together to Safeguard Children (2018), Keeping Children Safe in Education (2023), and all other relevant statutory guidance and legislation. Our safeguarding procedures are clear, comprehensive, and subject to regular review to ensure they reflect the latest legal requirements and best practices.

**Key Safeguarding Measures Include:**

Robust Staff Training**:**All staff receive mandatory safeguarding training as part of their induction and ongoing development. This includes specific training on:

* + Child Protection
	+ Prevent Duty (radicalisation and extremism)
	+ Child Sexual Exploitation (CSE)
	+ County Lines and criminal exploitation
	+ Online Safety and digital safeguarding
	+ PACE
	+ Peer-on-peer abuse, contextual safeguarding, and professional boundaries

**Training is regularly refreshed and updated in response to emerging risks and changes in legislation or guidance.**

* **Designated Safeguarding Leadership:**
The home has a named **Designated Safeguarding Lead (DSL)** and **Deputy DSLs**, all of whom have extensive experience in safeguarding, alternative education, and supporting vulnerable children. They take a proactive role in overseeing safeguarding practice, responding to concerns, and supporting staff with guidance and decision-making.
* **Whistleblowing Policy:**
We maintain a clear and accessible whistleblowing policy that encourages staff to report any concerns about poor practice, misconduct, or risk to children without fear of retaliation. Staff are trained to understand how to raise concerns both internally and externally.
* **Safe Recruitment:**
All staff are recruited following safer recruitment procedures. This includes enhanced DBS checks, verified references, comprehensive interviews, and checks of employment history and qualifications. No member of staff begins work without full clearance and appropriate induction.
* **Individual Risk Assessments and Management Plans:**
Each child has a personalised risk assessment and safeguarding plan in place, which are reviewed regularly and updated following any incidents or changes in circumstances. These documents identify potential risks to the child or others and outline clear strategies for risk reduction and safety.
* **Recording and Monitoring Systems:**
Daily logs, incident reports, and a secure electronic safeguarding system are used to record concerns, track patterns, and ensure timely and effective responses. All records are audited regularly by senior staff and contribute to multi-agency safeguarding decisions.
* **Multi-Agency Working:**
Where safeguarding concerns arise, we work closely with the Local Authority Designated Officer (LADO), Children’s Social Care, health services, education providers, and the police. We are committed to open, honest, and proactive communication with all safeguarding partners and families (where appropriate) to ensure the best outcomes for children.
* **Culture of Safety:**
We strive to create a culture where safeguarding is everyone’s responsibility. Children are supported to understand their rights, recognise unsafe situations, and know how to seek help. Staff model safe and respectful relationships, maintain clear boundaries, and promote open dialogue with children at all times.

Cultural, linguistic and religious needs

# **6.The arrangements for supporting the cultural, linguistic and religious needs of children.**

We are committed to creating an inclusive environment where every child’s cultural identity, language, and religious beliefs are recognised, valued, and actively supported. We believe that nurturing a child’s sense of identity is essential to their emotional well-being and development.

**We ensure that:**

* Cultural identity is embraced through personalised care, inclusive routines, and opportunities to recognise and celebrate cultural traditions, festivals, and milestones.
* Language needs are supported appropriately. Children for whom English is not a first language receive tailored assistance to communicate effectively and to access education and care without barriers.
* Religious beliefs and practices are respected and facilitated. Where appropriate, children are supported to observe religious customs, attend places of worship, and maintain spiritual routines.
* Celebrating cultural diversity and holidays

Our team works proactively to understand each child’s emotional, cultural, and behavioural needs. We use a child-centred approach, tailoring care plans to meet individual identities, religious beliefs, language preferences, and family backgrounds.

Each child’s care plan reflects their background, values, and preferences. Staff are trained in delivering culturally responsive care and work closely with families, social workers, and community organisations to ensure that each child feels respected, understood, and empowered to express who they are.

Complaints

# **7. Details of who to contact if a person has a complaint about the home and how that person can access the home’s complaints policy.**

**Complaints and Concerns**

Complaints and Representations Procedure – Andaman House

Andaman House complies fully with the Children Act 1989 and the Children’s Homes (England) Regulations 2015, ensuring that all children, their parents or carers, social workers, advocates, and others with a legitimate interest in the child’s welfare are able to access and use the home’s complaints and representation procedures.

All relevant stakeholders – including families, professionals, and the Local Authority – may request a copy of Andaman House’s full complaints policy. This is also outlined in our Statement of Purpose, and a child-friendly version is available in the Children’s Guide, which is given to each child and their key adults at the time of admission.

We view complaints and concerns as a vital part of our commitment to continuously improve the quality of our care and the experience of the children living at Andaman House. Children are actively supported and encouraged to speak up about anything that worries them, and they are assured that doing so will never lead to punishment or negative consequences.

**How Children Can Raise a Complaint**

A complaint can be about anything a child is unhappy or uncomfortable with – this could include the way they are being treated, how others are behaving, or decisions being made about their care.

Children can raise complaints in any of the following ways:

* By speaking to any staff member, including their Key Worker or the Manager
* During community meetings or key work sessions
* By completing a complaints form (available in the home)
* By using the worry box located in the home
* By contacting someone independent (e.g., their social worker, the Children’s Commissioner, NSPCC, or Ofsted)
* With support from an independent advocate, which staff can help them access

**All children have access to a private telephone in the home and can speak confidentially to external professionals, including:**

* Their Social Worker
* Independent Reviewing Officer (IRO)
* Ofsted
* NSPCC Childline or Young Person’s Helpline
* Children’s Commissioner for England

Children will be reminded regularly of their right to complain, and this will be revisited in key work sessions or whenever concerns arise.

**How Adults Can Raise a Complaint**

Parents, carers, social workers, and any individual with a legitimate interest in a child's welfare can make a complaint by:

* Contacting the Registered Manager of Andaman House
* Writing or emailing the home using the contact details provided
* Speaking to a team member who will escalate the concern appropriately

If the complaint is about the Manager, it will be referred to the Responsible Individual for Andaman House.

**Internal Complaints Procedure**

1. We first aim to resolve concerns informally, through supportive discussion and problem-solving. A designated senior member of staff will listen to the concern and offer advice or reassurance.
2. The individual raising the complaint will be informed of their right to seek independent advice (e.g. Social worker, IRO , advocate, OFSTED, or an advocate).

**If informal resolution is not successful**:

1. An independent senior manager will be appointed to carry out a full investigation.
2. The placing Local Authority will be informed and may wish to carry out their own investigation.

**The independent investigator will:**

* Have access to relevant records and documents
* Speak with staff, children, and others as appropriate
* Provide a written report of findings within 28 days wherever possible

**If the complainant is dissatisfied with the outcome, they may appeal in writing to the Responsible Individual. Both the complainant and investigating officer may make formal representations during this process.**

**Safeguarding-Related Complaints**

If a complaint relates to safeguarding concerns, this will be escalated immediately to the Designated Safeguarding Lead (DSL) and appropriate steps will be taken in line with local authority safeguarding procedure

Information about the DSL, and how to contact them, is clearly displayed on the website, shared in house meetings and included in the Children’s Guide.

**Commitment to Child-Friendly Practice**

At Andaman House, we are committed to:

* Ensuring all children know how to make a complaint
* Supporting children to express themselves in ways that suit their individual communication needs
* Valuing and acting on all concerns, whether raised informally or formally
* Providing support from trusted adults or external advocates as needed
* Creating a culture where children feel safe, heard, and respected

Investigation and Recording of Complaints – Andaman House

**How Complaints Are Investigated**

Most complaints at Andaman House are resolved quickly and fairly by staff in the home—usually by the Manager. When a complaint is made:

* The person making the complaint will be asked to explain what the problem is and what outcome they would like.
* They will receive a written response explaining what action will be taken.
* They will be asked whether they are satisfied with the outcome.

**If the issue is not resolved, or if the person is unhappy with how the home has responded so far:**

* The complaint may be investigated by someone outside of the home, such as a senior manager from Andaman House or the wider organisation.
* The investigator will be independent, and their job is to look into what happened and recommend what should be done.
* The child or young person will receive a clear explanation in writing of the outcome of that investigation.

At any time, children also have the right to raise concerns with:

* Their social worker
* Ofsted
* The Children’s Commissioner
* The independent reviewing officer
* Or with help from an advocate

Children will never be punished or treated unfairly for raising a complaint.

**Recording Complaints**

All complaints are carefully recorded. At Andaman House, complaints from children and young people are logged on our system, which is secure and confidential.

Children have the right to:

* See a copy of the record of their complaint
* Say whether they are happy with the outcome

This helps ensure their voice is heard and recorded throughout the process.

**Making a Complaint About Your Placing Authority**

Children can also make a complaint about their social worker or their local authority (placing authority).

Each Local Authority has its own complaints procedure, and:

* Children will be given a copy of this when they move into Andaman House.
* Their Key Worker will explain it to them and offer help if they want to use it.

Children can complain if they feel:

* Their social worker isn’t listening to them
* The Local Authority isn’t meeting their needs
* They disagree with decisions made about their care

**What Is an Advocate and How Can They Help?**

An advocate is someone independent who helps children speak up, especially when something is wrong or when they want to make a complaint.

An advocate can:

* Help a child express their views, wishes, or feelings
* Speak on behalf of a child, if they want
* Support the child in raising a complaint and taking it through to the end

Children can ask for an advocate at any time, and staff will help them access this service.

Top of Form

Bottom of Form

At Andaman House, we are committed to listening to concerns and resolving complaints in a fair, transparent, and timely manner. We believe that feedback—whether positive or negative—is essential to improving our practice and ensuring the best possible outcomes for the children and young people in our care.

Children, families, professionals, and visitors are encouraged to raise issues or make complaints without fear of discrimination, negative consequences, or unfair treatment. We foster a culture of openness and welcome the opportunity to address any concerns quickly and effectively.

Support for Children

We recognise that children may need help to express their concerns or worries. We take a child-centred approach and ensure that all children:

* Are regularly reminded of their right to complain or speak up.
* Can use their preferred methods of communication, including verbal, written, visual, or assisted communication tools.
* Have access to trusted adults and independent advocates who can support them in making a complaint.
* Know how to use the "Worry Box," talk to their Key Worker, or speak to the Registered Manager or external professionals such as an IRO or social worker.

Making a Complaint

Complaints can be made in the following ways:

* In person – by speaking with any member of staff, keyworkers, the Deputy Manager (when appointed), the Registered Manager or responsible individual
* By phone – call us on [Insert phone number].
* By email or post – written complaints can be sent to [Insert complaints email] or [Insert postal address].
* Via a professional – such as a social worker, advocate, or Ofsted.

All complaints are logged and acknowledged within 3 working days, with a full response provided within 28 days, unless an extension is agreed.

**Accessing the Complaints Policy**

Anyone wishing to view the home’s full Complaints Policy can:

* Request a copy from the Registered Manager.
* View the policy during a visit to the home.
* Ask for an electronic version to be sent via email or secure platform.
* Contact us at [Insert email/contact] to request a copy in an alternative format if needed.

Our Complaints Policy sets out the different stages of complaint resolution, expected timescales, and what to do if you are not satisfied with the outcome.

**Escalation and External Contacts**

If a complainant remains dissatisfied after our internal process is completed, they can escalate the complaint to:

* **Ofsted (the home’s regulator):
Email: enquiries@ofsted.gov.uk
Phone: 0300 123 1231
Address: Ofsted, Piccadilly Gate, Store Street, Manchester, M1 2WD**
* **Placing Local Authority – for children in care, their social worker or the complaints department of the Local Authority can also assist.**

We are committed to treating all complaints seriously and learning from them to strengthen our provision and practice

**Complaints Contact**
Complaints can be made to:
 Registered Manager or Responsible individual

**Registered manager:** TBC

**Responsible individual/ Director**
Phone: 07398 206 221
Email: jemmawilmott@andamanresidential.co.uk

Complaints may be submitted verbally, in writing, or via email. We encourage informal resolution wherever possible; however, all formal complaints are fully investigated and responded to in line with our complaints policy.

**Accessing the Complaints Policy**
Our full complaints policy is available:

* On request from the home
* Within the Children’s Guide
* From the Registered Manager or a senior member of staff
* On the website

If a complainant is dissatisfied with the outcome of their complaint, they may contact Ofsted:

Child protection and behaviour policies

**8.Details of How a Person, Body or Organisation Involved in the Care or Protection of a Child Can Access the Home’s Child Protection or Behaviour Management Policies**

At Andaman House, we are committed to transparency, accountability, and partnership working with all those involved in the care, protection, and well-being of children and young people. We recognise the importance of open communication and information sharing with parents, carers, social workers, local authorities, schools, healthcare professionals, and other statutory and voluntary agencies.

Any individual, professional, agency, or organisation who has a legitimate interest in a child’s welfare—including those involved in safeguarding, education, or care planning—can access our core safeguarding documentation upon request.

**The following policies are available:**

* Child Protection and Safeguarding Policy – outlining our approach to identifying, responding to, and reporting concerns relating to the safety and welfare of children.
* Behaviour Management Policy – detailing our strategies for supporting positive behaviour, managing challenging behaviour, and promoting a safe and nurturing environment.

**To access these policies:**

* Requests can be made in writing via email to the Registered Manager or the home’s central contact address: 15 Forest Walk, Fishponds, Bristol, BS16 4DB.
* Alternatively, copies can be provided during professional visits or planning meetings or shared securely via the child’s Local Authority if appropriate.
* We aim to respond to all requests within 5 working days and ensure that documents are shared in an accessible format.

All professionals visiting the home for official purposes are also welcome to view these policies on site. Printed copies are available at reception upon request, and electronic versions can be emailed directly or made available via secure cloud storage if required.

We welcome collaboration and value the contributions of all agencies working to support the safety, development, and rights of the children in our care.

Let me know if you'd like this tailored further to include specific procedures, named contacts, or formatting for your Welcome Pack or Statement of Purpose.

Bottom of Form

These can be obtained by contacting:
Registered Manager: TBC

Tia Saddique -Designated Safeguarding Lead
Phone: TBC
Email: TBC

Policies are provided promptly upon request and can be explained in further detail where required. They are also shared with placing authorities as part of placement planning, monitoring, and review. Where needed, policies can be made available in accessible formats to ensure understanding by all relevant parties.

Consulting

**9.A description of the home’s policy and approach to consulting children about the quality of their care.**

Children’s views are central to how the home is run. We are committed to creating an environment where every child feels safe to express their views and knows that their voice matters. Feedback is actively sought to help shape care planning, routines, and the wider experience of living in the home.

**Our Approach:**

* Regular key work sessions provide a safe and supportive space for each child to share their thoughts, raise concerns, and contribute to their care planning.
* Weekly house meetings offer a structured forum for children to suggest changes, raise issues, and participate in shared decision-making about group living. With a consistent approach and reminder to children on how to raise complaints
* Worry boxes available for children to report anonymously
* Feedback tools and questionnaires are used periodically to capture children’s opinions on their care, environment, and relationships within the home.
* Consultation on relevant decisions and policies, where age and understanding allow, empowers children to feel involved, respected, and informed.

All feedback is listened to, recorded, and acted upon where appropriate. When changes cannot be made, we provide clear explanations so that children feel respected and understand the reasoning behind them. We also analyse recurring themes in feedback to inform ongoing service development and ensure our care continues to reflect children’s needs, rights, and experiences.

The responsible individual will attend house meetings fortnightly to respond to children’s request.

Anti-discriminatory, Children’s rights

# **9. A description of the home’s policy and approach in relation to—(a) anti-discriminatory practice in respect of children and their families; and(b) children’s rights.**

**(a) Anti-Discriminatory Practice**
We are committed to promoting equality, inclusion, and respect for all children and families. Discrimination of any kind—whether based on race, culture, gender, sexuality, disability, religion, or any other characteristic—is not tolerated.

Staff receive training to recognise unconscious bias, challenge discriminatory attitudes or behaviours, and deliver care that affirms each child’s identity, culture, values, and needs. Care planning and daily routines reflect and celebrate diversity, ensuring every child feels seen, accepted, and valued. We work in partnership with families, carers, and professionals to understand each child’s background and provide support that is sensitive, individualised, and free from prejudice.

**(b) Children’s Rights**
We are fully committed to upholding and promoting the rights of children as outlined in the United Nations Convention on the Rights of the Child (UNCRC). Our practice is founded on the principle that all children have the right to safety, dignity, participation, and protection from harm. We ensure that:

* Children are treated with dignity and respect in all interactions.
* Their views are actively sought, listened to, and used to inform care decisions.
* They are supported in accessing advocacy services and learning how to raise concerns.
* Their identity, privacy, and personal boundaries are always safeguarded.

Children’s rights are embedded in our home’s ethos, policies, and daily practice. We continually reflect on how to empower children to express themselves, make informed choices, and develop a strong sense of agency and self-worth.

Special educational needs

10. **Details of provision to support children with special educational needs.**

We are committed to providing inclusive, individualised care for children with special educational needs. Our approach is centred on understanding and meeting each child’s unique strengths, challenges, and aspirations. All staff are trained to identify SEN-related needs and respond with care that promotes progress, independence, and emotional well-being.

**Our approach includes:**

* Personalised care planning, developed in collaboration with the child, their family, education providers, and relevant professionals, incorporating Education, Health and Care Plans (EHCPs) where applicable.
* Close partnership with schools, SENCOs, and external specialists to ensure the timely provision of appropriate educational support, interventions, and resources.
* Therapeutic input, where required, to address emotional, behavioural, or developmental needs, often embedded into daily routines.
* Use of adaptive tools and strategies, such as visual schedules, communication aids, sensory resources, and structured routines to support regulation and learning.
* Environmental adaptations, as necessary, to promote physical, sensory, and emotional accessibility for all children.
* Experienced staffing team from alternative education who are able to recognise need and are aware of the pathway.
* Our team will be advocates for our young people during PEP’S/Annual reviews to ensure need is being met

We advocate for every child’s right to access education in a way that reflects their potential and learning style. Our team works closely with families and professionals to ensure consistent, joined-up support across home, school, and therapeutic settings, enabling children to participate fully, make progress, and feel successful in their learning.

Enjoyment and Achievement

# 11.The arrangements enable children to participate in and benefit from a variety of activities that meet their needs, develop, and reflect their creative, intellectual, physical, and social interests and skills.

# Activities, Enrichment, and Personal Development

At Andaman House, we recognise that meaningful, enjoyable activities play a crucial role in supporting children’s overall development, building resilience, and fostering a sense of identity and belonging. Our approach to activities is both structured and flexible, designed to meet the individual needs, preferences, and goals of each child in our care.

We offer a diverse range of planned and spontaneous experiences that reflect children’s creative, intellectual, physical, and social interests. Activities are carefully selected to support emotional well-being, promote self-esteem, and enhance life skills, while encouraging exploration and fun.

**Children are encouraged and supported to:**

* Pursue hobbies and interests such as art, music, drama, crafts, cooking, technology, or creative writing
* Engage in educational and enrichment experiences that promote curiosity, critical thinking, and a love of learning—including museum visits, science projects, or cultural events
* Participate in regular physical activities, such as swimming, football, yoga, cycling, dancing, or walks in nature, which support healthy lifestyles and regulate mood
* Build social and communication skills through group games, shared routines, collaborative tasks, and peer-led initiatives
* Experience new environments through regular trips and outings—such as beach days, theme parks, nature reserves, theatre performances, and seasonal events—that reflect their interests and cultural background
* Enjoy family-style holidays twice per year, offering shared memories, relationship-building, and restorative experiences away from the home environment

**Child-Centred Planning**

Activity planning is guided by each child’s care plan, personal development goals, and individual interests, incorporating the principles of PACE (Playfulness, Acceptance, Curiosity, and Empathy). Key workers play an active role in helping children reflect on their interests and aspirations and build these into their weekly routines.

Children are involved in shaping their own experiences. During weekly house meetings, they discuss and choose weekend activities and outings for the following week. This inclusive and empowering approach gives them a voice, encourages decision-making, and promotes ownership of their time and choices.

We also build in unstructured time to allow for creativity, autonomy, and relaxation—whether that’s baking in the kitchen, playing games in the lounge, or enjoying time in the garden.

**Inclusive and Equitable Access**

We are committed to ensuring that all children, regardless of ability or background, have equal access to enriching experiences. Activities are adapted to be inclusive and enjoyable for children with additional needs or specific requirements. Staff are trained to support participation and offer encouragement while maintaining appropriate supervision and safeguarding at all times.

**Our Aims**

We aim to ensure that every child in our care:

* Has regular access to fun, meaningful, and varied activities
* Feels included, respected, and confident in exploring their interests
* Gains skills that contribute to their emotional, social, and educational development
* Experiences a childhood filled with positive memories, growth, and laughter

We offer a diverse range of structured and spontaneous activities tailored to support each child’s unique interests, strengths, and developmental needs. Activities are planned to promote creativity, intellectual growth, physical well-being, emotional resilience, and social skills.

Children are supported and encouraged to:

* Explore hobbies and interests such as music, art, drama, crafts, or sports
* Participate in educational and enrichment activities that build confidence, curiosity, and a love of learning
* Take part in regular physical activity, including sports, walking, swimming, dance, or outdoor play
* Develop social skills through group games, shared responsibilities, and community involvement
* Attend trips and outings that broaden horizons and reflect their preferences and cultural identity
* Have family orientated holiday’s 2 x per year

Activity planning is informed by each child’s care plan and personal goals, using PACE and children are actively involved in choosing and shaping their experiences through key work sessions and ongoing consultation. Children will decide the week before during the house meeting where they would like to go the following weekend.

We aim to ensure every child has access to fun, meaningful opportunities that support their development, reflect who they are, and contribute positively to their well-being and quality of life.

Health

# 12. **Details of any healthcare or therapy provided, including:****(a) details of the qualifications and professional supervision of the staff involved in providing any healthcare or therapy; and(b) information about how the effectiveness of any healthcare or therapy provided is measured, the evidence demonstrating its effectiveness and details of how the information or the evidence can be accessed.**

We ensure that every child has access to appropriate healthcare and therapeutic support tailored to their individual needs. These services may be provided in-house or commissioned externally, depending on the child’s care plan and presenting needs.

**(a) Qualifications and Supervision**
All therapeutic interventions are delivered by suitably qualified professionals—such as Trauma informed mental health practitioners using PACE and WINE. This intervention is based around emotional regulation and is not intended to replace intense therapy models with professionals who hold recognised qualifications and are registered with relevant professional bodies. Trauma informed and mental health practitioners are qualified to level 5 to deliver these sessions and CPD to staff to ensure the PACE model is delivered.

Therapeutic staff receive regular clinical supervision in accordance with the standards of their governing bodies, ensuring safe, ethical, and effective practice.

Our home offers access to weekly Trauma-informed therapy sessions delivered by a qualified external therapist.

We maintain clear records of qualifications and registration for all professionals delivering support.

**(b) Measuring Effectiveness and Accessing Evidence**
Each child receiving therapeutic or healthcare support has an individual plan with clear goals, outcome measures, and review points. Progress is monitored using:

* Clinical notes and session summaries
* Observations from key workers and residential staff
* Feedback from children and professionals
* Multi-agency reviews and placement planning meetings

The feedback from these sessions will be used to inform practice on the most effective way to communicate with the children involved.

**Evidence of effectiveness is:**

* Tracked through the child’s care and placement plan
* Shared with placing authorities and relevant professionals through regular reporting
* Available upon request to those with parental responsibility or statutory oversight

All interventions are guided by evidence-based practice and are reviewed regularly to ensure they remain appropriate, proportionate, and effective in meeting the child’s evolving needs.

Children’s physical and mental health is a core priority. Upon admission, a health assessment is arranged, and a health passport is developed with input from the child, carers, and medical professionals.

**Services include:**

* Registration with GP, dentist, optician, and mental health services.
* Involvement with CAMHS, paediatricians, and specialist services as required.
* Access to therapeutic input (in-house and externally commissioned).Support with self-care, hygiene, and healthy eating.
* We work holistically with professionals to identify and respond to health needs, including sexual health, substance misuse prevention, and emotional resilience building.

Positive Relationships

[13. The arrangements for promoting contact between children and their families and friends. 16](#_Toc199862000)

We actively support safe, meaningful contact between children and their families or significant others where it is in the child’s best interests and consistent with their care plan. Our approach recognises the importance of maintaining secure, healthy relationships while safeguarding the child’s emotional and physical well-being.

**Our approach includes:**

* Individualised contact plans, developed in agreement with the placing authority, clearly outlining the type, frequency, location, and supervision level of contact.
* Support for various forms of contact, including face-to-face visits, telephone or video calls, written communication, and online platforms—using private or supervised spaces as appropriate.
* Regular review of contact arrangements, taking into account the child’s views, emotional readiness, and any changing circumstances.
* Encouragement of appropriate peer contact and friendships based on individual risk assessments and placement plans.
* Facilitation of contact during special occasions, such as birthdays, holidays, or key school events, to maintain connection and continuity.

Children are encouraged and supported to share their feelings and preferences around contact. Staff work sensitively and collaboratively with families and professionals to make arrangements that promote emotional well-being, reflect the child’s needs, and preserve important relationships in a safe and considerate way.

Protection of Children

# **14.A description of the home’s approach to the monitoring and surveillance of children.**

The home promotes a safe and supportive environment through proportionate monitoring practices that respect each child’s dignity, privacy, and rights. Monitoring is always child-centred, risk-informed, and used only when necessary to safeguard children and promote well-being.

* CCTV is in use only in external areas to support safeguarding, supervision, and site security. Cameras are never used in private spaces such as bedrooms or bathrooms.
* Children, families, and professionals are informed about the use of CCTV, with clear signage and access to the relevant policies.
* Monitoring is based on relational practice—staff use regular engagement, supervision, and observation to support safety and well-being, not intrusive surveillance.
* Access control measures, such as door alarms or fob systems, may be used as part of a child’s risk management plan, agreed in consultation with the placing authority and included in the child’s care plan.
* All monitoring arrangements are regularly reviewed to ensure they remain proportionate, justified, and in the best interests of the child.
* Reviewing of CCTV will only be available to DSL’s and professionals if deemed necessary and appropriate whilst inline with GDPR.

Any use of surveillance or monitoring technology is fully risk-assessed, documented, and compliant with relevant legal and regulatory requirements, including data protection legislation, human rights, and children’s rights.

Behaviour support and positive handling

**15. Details of the home’s approach to behavioural support, including information about—
(a) the home’s approach to restraint in relation to children; and
(b) how persons working in the home are trained in restraint, and how their competence is assessed.**

We adopt a proactive, trauma-informed approach to behaviour support built on consistent routines, strong relationships, and early intervention. We aim to promote emotional regulation, resilience, and safe behaviour through understanding and connection, not control.

**We support:**

Regular keywork sessions and life story work. Emotional literacy development. Regulation strategies for emotional and behavioural challenges.

Positive behaviour support plans.

Access to advocacy and therapeutic services.

Trauma informed relationship policy for staff

(**a) Use of Restraint
Physical restraint is used only as a last resort and only when necessary to prevent serious harm to the child or others. When restraint is required, it is:**

* Carried out using approved, least-restrictive techniques in line with recognised practice
* Clearly and promptly recorded in accordance with Regulation 35 of the Children’s Homes (England) Regulations 2015
* Reviewed with the child and the team, with a focus on reflection, emotional processing, and learning
* Liaising with the child’s social worker/advocate to ensure child’s voice is heard

We are committed to de-escalation as the primary response to behavioural distress. Each child has an individual behaviour support plan, informed by their needs, history, and preferred strategies for support, to help prevent crises and reduce the need for restrictive measures.

**(b) Staff Training and Competence
All staff receive accredited training in:**

* Positive behaviour support and de-escalation strategies
* The safe and lawful use of physical restraint using TEAM TEACH
* Trauma-informed and attachment-aware approaches to behaviour

Staff competence is assessed through practical scenarios, direct observation, and formal assessment. Refresher training is provided at least annually or more frequently where required by policy or practice standards.

This will be used in accordance with the Trauma informed relationship policy.

Training is regularly reviewed to reflect emerging best practices, new legislation, and the evolving needs of the children in our care.

Leadership and Management

1. **(a) Registered Provider**

**Name:** Andaman Residential Ltd
**Work Address:** 15 Forest Walk, Fishponds, Bristol, BS16 4DB
**Email:** Info@andamanresidential.co.uk
**Phone:** 07398 206 221

1. **(b) Responsible Individual**

**Name:** Jemma Wilmott
**Work Address:** 15 Forest Walk, Fishponds, Bristol, BS16 4DB
**Email:** JemmaWilmott@andamanresidential.co.uk
**Phone:** 07398 206 221

1. **(c) Registered Manager**

**Name:** TBC
**Work Address:** 15 Forest Walk, Fishponds, Bristol, BS16 4DB
**Email:** TBC
**Phone:** TBC

# Details of the experience and qualifications of staff, including any staff commissioned to provide education or health care.

**Staffing Standards and Development at Andaman House**

At Andaman House, we believe that the quality, consistency, and reliability of our team are essential to delivering excellent care and achieving positive outcomes for children and young people. Our staff are selected not only for their qualifications but also for their values, emotional resilience, and ability to build meaningful, therapeutic relationships with children.

The minimum qualification standard for a Registered Manager at Andaman House is a QCF Level 5 Diploma in Leadership for Health and Social Care and Children and Young People's Services (or equivalent). For Residential Support Workers, the minimum requirement is a Level 3 Diploma in Residential Childcare (or equivalent) to be completed in 12 months following probation. We actively support all staff to meet and exceed these standards through a structured Personal Development Plan (PDP), which includes access to internal and external training.

The home operates with a minimum staffing team of 12, adjusted according to the needs and occupancy levels. Staffing levels are arranged to ensure 24-hour cover, including day shifts (typically 4:5 staff for five children), three sleep-in staff, and waking night provision when required. Bank staff are also retained to cover gaps due to sickness or absence, ensuring continuity of care at all times.

**Staff are supported through**:

* Formal supervision sessions
* 1:1 key working supervision
* Group supervision as part of team meetings
* Ongoing reflective practice sessions

All team members have access to:

* Internal training workshops
* Mandatory external courses by arrangement
* A comprehensive policy and procedure library

Team members are recruited based on their experience, interpersonal skills, and capacity to work within trauma-informed and attachment-aware frameworks. All staff are expected to contribute to multidisciplinary working and to engage with children’s families and professional networks as part of a holistic care approach.

Experience of the Responsible Individual – Andaman House

Jemma Wilmott, the Responsible Individual/managing Director for Andaman House, brings a strong and diverse background in healthcare and children’s services, underpinned by both formal qualifications and frontline leadership experience.

Her professional journey includes:

* Over a decade working in the NHS, with direct experience in healthcare delivery, including adult and child services
* Experience within homecare settings, providing community-based support for vulnerable individuals including adults and children with disabilities
* Leadership of a young mothers’ support group, offering guidance, advocacy, and safeguarding support
* Managerial experience of 10 years leading an alternative education provision, supporting young people with complex educational and emotional needs
* Child in care lead with experience of chairing PEP’S/Annual reviews
* Extensive experience in multi-professional meetings

She holds the following qualifications:

* NVQ Level 2 in healthcare
* Level 3 Diploma in Health and Social Care
* Level 3 Diploma in Children and Young People’s Services
* Level 5 Diploma as a Trauma-Informed men Wellbeing Practitioner
* Designated Safeguarding lead

She is also trained in:

* Educational Visits Coordination (EVC)
* First Aid and Emergency First Aid
* Medication administration and oversight
* Team Teach (Positive Behaviour Support)
* That Reading Thing (literacy support intervention)
* SALT (Speech and Language Therapy) assessment techniques

Her professional ethos is centred on therapeutic, relationship-based care, and she plays an active role in quality assurance, compliance, and practice development across Andaman House. She is committed to embedding trauma-informed approaches, promoting inclusive and personalised care, and developing a team culture that places children’s emotional wellbeing at its heart.

**Management Team and Practice Oversight**

The management team at Andaman House brings a range of experience across health, education, residential care, and community-based services. This diverse skillset strengthens our ability to respond to complex needs with compassion, competence, and creativity.

Staff are supported to grow professionally and personally through:

* Regular CPD opportunities
* Coaching and mentoring
* Bespoke training modules linked to the home's Statement of Purpose
* Leadership development opportunities

Our collective commitment to safeguarding, education, and therapeutic practice ensures that Andaman House remains a nurturing, responsive, and high-quality environment for the children and young people in our care

# **17. Details of the management and staffing structure of the home, including arrangements for the professional supervision of staff, including staff that provide education or health care.**

The home is led by a **Registered Manager,** who is responsible for day-to-day operations, safeguarding, and delivering high-quality, child-centred care. The manager is supported by a senior team, which may include a Deputy Manager, Team Leaders, and Residential Support Workers.

 **Management and Staffing Structure**

Andaman House is led by a highly skilled and experienced Registered Manager, who holds overall responsibility for the day-to-day management of the home. This includes ensuring the delivery of high-quality, trauma-informed care, overseeing safeguarding arrangements, maintaining compliance with statutory requirements, and promoting a safe, nurturing environment in which children can thrive.

The Registered Manager is supported by a Deputy Manager and a team of Senior Residential Support Workers (Team Leaders) and Residential Support Workers, each of whom plays a vital role in delivering consistent, compassionate, and child-centred care. Together, the leadership and care teams form a resilient, skilled, and responsive workforce equipped to meet the complex and diverse needs of children living at Andaman House. This core staffing model provides 3- 4 staff members on shift per day, two evenings and two overnight to support the children living at Andaman House. Staff allocation is designed to ensure the highest level of supervision, engagement, and support, with flexibility to meet the changing needs of the home.

We aim to maintain a gender-balanced team, where possible, in order to provide positive role models for young people. Our approach is grounded in nurturing care, meaningful relationships, and positive daily interactions that support each child's social, emotional, and developmental growth.

**Staffing Structure at Full Occupancy:**

When operating at full capacity (up to four children), the home is staffed as follows:

* 1 x Registered Manager
* 1 x Deputy Manager
* 6 x Team Leaders / Senior Residential Support Workers
* 7 x Residential Support Workers

This staffing model is designed to ensure that 3–4 care staff are on duty during the day, 2 in the evening, and 2 overnight. This level of cover allows for proactive engagement, effective safeguarding, and sufficient flexibility to meet the dynamic needs of the children and the home.

Staff allocation is informed by individual risk assessments, placement compatibility, and planned activities. When required, staffing levels are adjusted in response to emerging needs, behaviours, or increased support plans (e.g., for transitions, key work, or hospital appointments).

We strive to maintain a gender-balanced team, wherever possible, to ensure children have access to positive male and female role models, reflecting healthy adult relationships and promoting gender inclusivity.

**Supervision, Support, and Professional Oversight**

Staff at Andaman House receive regular professional supervision and structured support to ensure they are confident, competent, and well-equipped to meet the demands of their roles.

Supervision Arrangements:

* All staff receive monthly formal supervision with a senior or line manager. Supervision sessions include reflection on practice, professional development goals, emotional resilience, safeguarding issues, and the quality of relationships with children.
* Additional ad-hoc supervision and debriefs are provided following significant incidents, disclosures, or times of challenge, ensuring staff feel supported and safe in their work.
* The Registered Manager is supervised by a senior representative of the provider organisation and attends external supervision forums and leadership training.

Training and Development:

* All team members undertake mandatory training, including safeguarding, behaviour support, therapeutic care, and PACE-based approaches.
* Specialist training is provided in SEND, mental health, substance misuse, CSE/CCE, and online safety.
* Staff who support education or health care delivery are given appropriate training in those areas, including the management of EHCPs, supporting neurodiverse learners, and working in partnership with educational and clinical professionals.

Healthcare and Education Oversight:

* Where staff are directly involved in healthcare delivery (e.g., administration of medication, support with CAMHS plans, or specialist appointments), they receive training aligned with NICE guidelines and local health protocols. Health-related responsibilities are clearly documented and overseen by the manager, with input from qualified professionals where needed.
* Staff liaise closely with education providers, tutors, and SEN coordinators to support children's access to learning, implement EHCP targets, and contribute to PEPs.

Staffing hours and Rota system

**19.Staffing Hours and Rota System**

18. Rota and Staffing Hours

We believe in fostering continuity, consistency, and trust through the presence of familiar, reliable adults. Our rota system is carefully designed to balance staff well-being with the importance of stability for children.

* Day staff are typically on shift from 07:00 to 22:00, with planned handovers, supervision time, and availability for family contact, key work, and activity planning.
* Night staff coverage includes a mix of sleep-in and waking night shifts, depending on the assessed needs of the children at any given time. Risk assessments and placement planning determine the appropriate overnight model.
* A clear on-call Rota ensures that a senior member of staff is available 24/7, providing guidance, support, and decision-making outside of standard hours.

The Rota promotes balanced working patterns for staff, enabling them to build strong relationships with children, while maintaining rest, reflection, and time for professional development.

We believe that **continuity of care** is key to providing a stable, trusting environment for children. This is reflected in our staffing rota, which is designed to ensure that children regularly interact with familiar adults.

Each member of the care team works through a Rota system that promotes relationship-building and consistent presence. The Registered Manager is present during the day and is supported by an on-call system, which ensures a senior member of staff is always contactable outside of standard hours.

**Staffing Structure at full capacity.**

* **Registered Provider/Responsible Individual**Provides strategic oversight and is accountable for governance, compliance, and continuous improvement. Ensures the home meets legal, regulatory, and quality standards.
* **Registered Manager**
Oversees daily operations, staff leadership, safeguarding, placement planning, and quality assurance. Ensures that each child receives safe, personalised, and nurturing care.
* **Deputy Manager/Team Leaders (planned recruitment)**Support the Registered Manager in operational duties, including rota planning, staff supervision, incident oversight, and shift leadership. Maintain high standards of practice and care delivery.
* **Residential Support Workers**
Deliver direct care and support, building trusting relationships with children and helping them work toward positive outcomes. Staff follow individual placement and risk management plans to ensure consistency and safety.
* **Sleep in /or Wake Night Staff (depending on need)**
Provide overnight supervision, care, and emotional reassurance. Maintain records, respond to needs or incidents, and monitor well-being throughout the night.
* **Specialist Roles (where applicable)**
The home may employ or commission professionals, such as therapists, education specialists, or clinicians, depending on the children's needs.

**Staffing Shortfalls and Contingency Planning**

To maintain safe staffing levels, Andaman House operates a proactive and flexible approach to covering staffing shortfalls:

* Planned absences (e.g., annual leave or training) are typically absorbed within the existing rota without falling below the minimum staffing levels.

Unplanned shortfalls (e.g., sickness or emergency leave) are managed in the following ways:

* Offering overtime to permanent members of the Andaman House team.
* Utilisation of our bank staff team, who have completed a condensed induction programme, and all required safer recruitment checks, ensuring they are trained and suitable to work with children.
* This structured yet flexible approach allows us to ensure consistent, high-quality care delivery—even in the face of unexpected staffing changes
* Agency use where all other options have been exhausted

Bottom of Form

##  **Supervision and Support**

We are committed to cultivating a skilled, reflective, and well-supported team. Our supervision framework ensures staff are regularly guided, supported, and held accountable in line with the **Children’s Homes (England) Regulations 2015** and the **Quality Standards.**

**Key elements of our supervision structure include:**

* **Formal Supervision**
All staff receive one-to-one supervision every 4–6 weeks, with more frequent sessions for new or developing staff. Sessions focus on safeguarding, performance, well-being, and reflective practice.
* **Clinical supervision**

**All staff receive group session clinical supervision for trauma informed working and support**

**Annual Appraisals**

Staff receive an annual appraisal to review progress, identify development goals, and align individual performance with the home's values and priorities.

* **Line Management Oversight**Senior staff (Registered Manager and Deputy) provide daily leadership, informal supervision, and quality oversight to ensure consistent, safe practice and team accountability.
* **Clinical or Specialist Supervision**
Staff involved in delivering education or therapeutic input receive additional supervision tailored to their qualifications and roles, as provided by appropriately trained professionals.
* **Induction and Ongoing Training**
New staff complete a structured induction and probation process. Supervision includes regular review of training needs, competence, and areas for professional growth.
* **Reflective Practice**
Regular team meetings debrief, and post-incident reflections foster learning, emotional resilience, and cohesion. These spaces support staff in processing events and improving practice in a supportive environment.
* **Restorative conversations**
* **staff will receive scripts to have repair with young people to restore the relationships.**

This approach ensures that all staff are equipped to provide safe, confident, and consistent care, informed by best practices, regulatory guidance, and the evolving needs of the children we support.

**20. Staffing and gender matching**

The staffing team will be of mixed gender, the home takes active steps to ensure that children have access to positive, appropriate role models of all genders. We recognise the importance of offering children balanced relational experiences that support their emotional development, identity formation, and social learning.

**To support this, we:**

* Aim to recruit a gender-balanced team wherever possible during staff recruitment and succession planning.
* Invite external professionals, visitors, and mentors of different genders into the home—such as youth workers, teachers, community leaders, and guest speakers.
* Encourage participation in community-based activities led by adults of various genders to promote inclusion and diverse interactions.
* Facilitate connections with wider support networks (e.g. family, carers, advocates) of both sexes, where safe and appropriate and aligned with the child’s care plan.

We promote values such as empathy, respect, and responsibility as essential qualities in all adult role models, regardless of gender. Children’s gender identity, preferences, and relational needs are actively considered in care planning, key work, and staff-child matching where feasible, ensuring that their experiences are supportive, inclusive, and developmentally appropriate.

**21. Admission Process:**

* Referral received from local authority placement officer.
* Comprehensive impact risk assessment carried out.
* Pre-placement planning meeting held with professionals, parents/carers (where applicable), and child.
* Planned transitions preferred, though emergency placements considered case-by-case.
* Age Range: 4-18
* Number and Gender: 4 children 4-18 years old mixed gender
* Needs Supported: Children with emotional and behavioural needs (EBD), including those affected by trauma, attachment difficulties, and other identified vulnerabilities.
* Placement Compatibility: All admissions are considered in light of the existing group dynamic, individual risk profiles, and the home's current capacity to provide safe and appropriate care.
* Admission Type: Planned and emergency admissions accepted

All referrals undergo a detailed impact and risk assessment, as well as a compatibility review, to ensure the home can provide a safe, stable, and supportive environment.

**Emergency Admissions**

I**n exceptional circumstances, emergency admissions may be considered where:**

* It is in the best interests of the child
* The home has capacity to provide safe and effective care
* The placing authority agrees to the emergency placement
* A risk management meeting is held

**The following steps are followed for emergency admissions:**

* Initial referral reviewed by the Registered Manager (or nominated senior manager)
* Completion of a rapid impact risk assessment to determine placement compatibility
* Immediate consultation with the placing authority and relevant professionals
* Safeguarding arrangements and initial placement plan implemented before or upon admission

**Discharge Criteria:**

* Child moves to foster care, adoption, or semi-independence.
* Child reaches 18 and transitions to adult care or independence. Placement ends due to incompatibility or risks that cannot be managed safely (last resort; only after **all interventions** are exhausted).
* Andaman house team to continue ongoing connection and support