

## North West Minimum Standards for Leaving Care Provision

### Introduction

Leaving Care providers, unlike providers of other Children's Services, have no National Minimum Standards or registration process to undertake before working with Young People. Placements Northwest in consultation with member Local Authorities and providers, established regional minimum standards to ensure that the providers operating in the region offer, at a minimum, an acceptable standard of placement.

This document establishes the regional minimum standards of provision expected from providers of Leaving Care Services. These standards will be assessed during a 12 month pilot in 2010 on behalf of the 21 member Local Authorities<sup>1</sup>. The standards focus on ensuring all Providers meet a minimum standard of safety for Young People. Individual Local Authorities who place with Providers will retain responsibility for the placement and contracting monitoring of placements.

### The Standards

The standards are split into two sections, *Critical Standards* and *Minimum Standards*.

1. *Critical Standards*: There are 8 Critical Standards identified. Where providers do not meet these critical standards, member LAs will be notified and new placements will not be made. Providers will be given 28 days to ensure compliance with the minimum standards. Where providers do not meet standards within 28 days they will be removed from the PNW list of provision
2. *Minimum Standards*: These are the *minimum* levels of safety and quality that providers of Leaving Care services are expected to deliver. These standards will be assessed and a report of compliance will be shared with member LAs. Providers who do not meet standards will be required to develop and implement an action plan, which will be shared with member LAs to achieve compliance.

### Assessment

The Assessment program has received 12 months pilot funding from Placements Northwest and will be undertaken by St Helens LA on behalf of PNW member LAs. The assessment will be done on a rolling program and 1 week notice will be given to providers prior to an assessment visit.

A report will be produced within 5 working days of the assessment visit which will be circulated to the provider and member Authorities.

Where Critical standards are not met, an Information Sharing Protocol to inform LAs will be instigated. Providers will have a maximum of 28 days to ensure compliance.

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<sup>1</sup> See Appendix A  
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Where minimum standards are not met providers will be required to instigate an action plan to implement compliance.

### **Sharing Information**

The assessment will produce a report. This will be shared with the provider and member Authorities. The report will also be archived on the regional database of provision, PIMS. Action Plans produced will be circulated to member LAs and archived on PIMS.

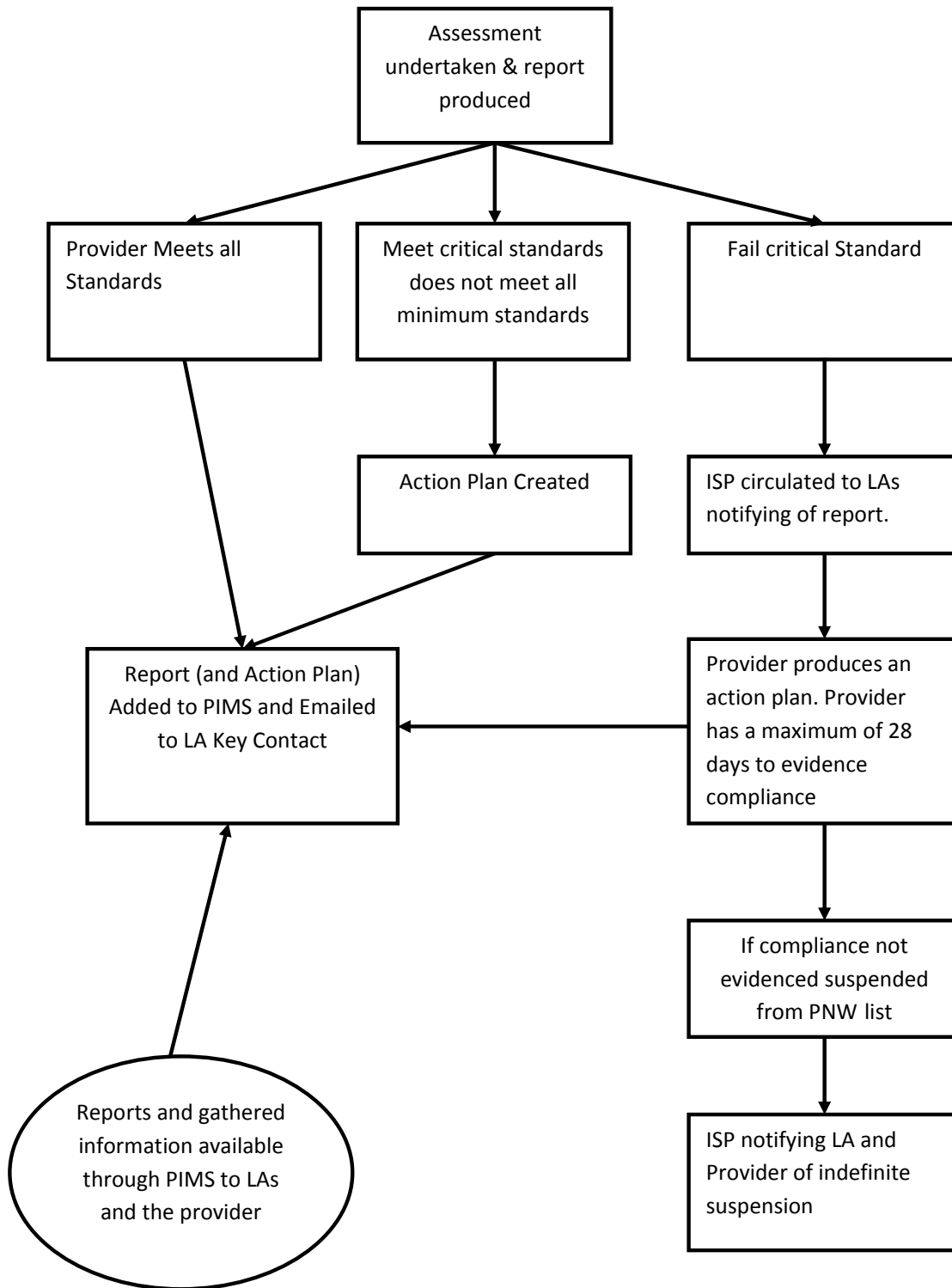
Where the assessment collects policies, these will also be archived on PIMS.

Where critical standards are not met, member LAs will be notified by an Information Sharing Protocol.

### **Pilot**

The Assessment Program is a pilot in the 2010/11 financial year. The pilot will be reviewed in December 2010, when Local Authority and Provider views will be sought on the assessment process.

## Map of Process



## Section 1: Critical Standards

The following standards are 'Critical'. Failure to comply with these standards will result in immediate suspension from the PNW list of registered provision and member Local Authorities will be notified of the suspension. Providers have 28 days to evidence compliance and be re-registered .

### **1. Providers must engage in safer recruitment. All staff must have in place as part of the recruitment process the following:**

- Proof of identity
- CRB enhanced disclosure reference number
- Date of CRB disclosure
- Name of company who completed the CRB disclosure
- Outcome of the disclosure
- Qualifications check
- At least 2 written references – one of which should be most recent employer
- Confirmation of the member of staff right to work in the UK
- Application forms which include full employment histories. Any gaps in the employment history must be queried.

CRBs must be undertaken by the organisation and can not be transferred from other organisations. CRBs must be renewed on a 3 yearly basis.

### **2. Providers must have a clear process for recording and monitoring delivered support to Young People**

### **3. Providers must have a clear Health and Safety policies**

- All staff must be aware of their roles and responsibility in relation to the policy
- Advice received from outside agencies must be recorded
- Policies must indicate what to do in an emergency

### **4. Providers must have a clear Safeguarding Policy**

- All staff must be aware of the roles and responsibilities in relation to the policy.
- Safeguarding Training should be delivered to appropriate staff as set out in 'Working Together<sup>2</sup>'
- Appropriate records of Safeguarding Training should be kept

### **5. Providers should have a Fire Safety Risk Assessments**

- Fire risk assessments to be completed by person with relevant experience, training and knowledge
- The policy should identify who undertakes Inspections
- Accommodation should provide fire safety equipment. The assessment must clearly identify any reasons for not providing safety equipment.
- Providers should keep records of advice received from external fire safety agencies.

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## **6. Inductions for new staff must include Health and Safety and Safeguarding.**

## **7. Providers must have a published policy for actions when a Young Person is missing from home.**

- The policy must indicate who should be contacted when a Young Person is missing from home
- All staff are aware of their responsibilities in relation to the policy
- The policy must indicate timescales for when notifications should be made
- Any variations to published policies should be clearly identified and have been made in consultation with the Young Person and Placing Local Authority

## **8. Up to date Risk Assessments for Young People**

- Young People should have Risk Assessments
- Risk Assessments should link to the policy on Young People Missing from Home
- Risk Assessments should be updated
- Risk Assessments should link to the Young Persons Licence agreement.

## **Section 2: Minimum Standards**

These standards define the minimum level of quality and safety providers of Leaving Care should achieve when offering services.

Where standards are not met providers will be required to produce an action plan for implementation. Where standards continue to not be met Providers may be suspended from the PNW list. Individual Local Authorities will determine whether to use providers who are not meeting minimum standards.

### **1: Staffing**

#### **1.1 Staffing List to include;**

- Qualifications
- Supervision, including details of delivered supervision.

#### **1.2 A staff development plan matched to individual staff need**

#### **1.3 There is a forum for staff to discuss good practice, learning and items of concern.**

### **2. Health and Safety**

#### **2.1 Young People to be given details of who to contact in an emergency and in non critical situations.**

#### **2.2 To undertake and maintain health and safety risk assessments**

#### **2.3 An up to date log of health and safety breaches must be kept**

#### **2.4 Properties to have smoke alarms and carbon monoxide alarms. If this equipment is not fitted the fire risk assessment must be explicit with the reasons as to why they are not fitted.**

#### **2.5 Each Young Person has an up to date Risk Assessment which offers guidance to staff.**

2.6 Young People have contact details for emergency and routine repairs.

### **3. Safeguarding**

3.1 Whistleblowing policy is readily available to staff and is covered as part of the induction process.

3.2 An anti-bullying policy included in the induction process

3.3 Staff should receive Safeguarding Training Appropriate to their involvement with Young People as set out in 'Working Together'.

3.3 Safeguarding Training delivered by a suitably qualified person, advice can be sought from local Safeguarding Boards.

### **4. Behaviour Management.**

4.1 All young people should receive and sign up to a behaviour licence

4.2 The behaviour licence is clear on the sanctions that inappropriate behaviour will incur.

4.3 The behaviour licence indicates areas of property open to the Young Person (if applicable)

4.3 Providers should have a policy on physical intervention (a 'no physical intervention' policy is acceptable) which is linked to staff induction and Young Peoples risk assessments

4.4 If Providers do have a physical intervention policy a clear mechanism for recording and reporting should be in place.

### **5 Health**

5.1 The company should have a medication policy. (This can include a non-dispensing policy).

5.2 Where medication is dispensed Staff should be suitably trained.

### **6 Quality Assurance and Monitoring**

6.1 The company has a complaints process which is given to Young People on admission

6.2 A complaints log detailing external complaints and actions taken

6.3 All Young People receive a welcome pack/young person's guide on admission

### **7. General Establishment Facilities**

7.1 Communal areas of the property are maintained to an appropriate level of cleanliness (if applicable)

7.2 The property is maintained to a suitable level of repair

7.3 Providers should ensure that Young People have an appropriate level of furnishings and white goods. This does not necessarily imply financial liability on the provider, but that providers should work with the Young Person and the LA to suitably equip the homes.

7.4 Electrical Equipment supplied in the home is PAT tested

## **Appendix A – List of Member Authorities.**

The 21 Authorities who are members of Placement Northwest:

Blackburn with Darwen Council

Blackpool Council

Bolton Metropolitan Borough Council

Bury Metropolitan Borough Council

Cheshire East Council

Cheshire West and Chester Council

Halton Borough Council

Knowsley Metropolitan Borough Council

Lancashire County Council

Manchester City Council

Oldham Metropolitan Borough Council

Rochdale Metropolitan Borough Council

Salford City Council

Sefton Council

St Helens Council

Stockport Metropolitan Borough Council

Tameside Metropolitan Borough Council

Trafford Council

Warrington Borough Council

Wigan Metropolitan Borough Council

Wirral Metropolitan Borough Council