



Department
for Education

Guide to the children's homes regulations including the quality standards

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Contents

Introduction	3
Principles for residential care	3
The diversity of children's homes settings	4
About the Quality Standards	5
Who is this guide for?	5
The regulatory framework and legal status of this guide	6
How this guide works	6
Inspection	7
The Quality Standards	8
Regulation 5 - engaging with the wider system to ensure each child's needs are met	8
The quality and purpose of care standard	11
The children's wishes and feelings standard	17
The education standard	21
The enjoyment and achievement standard	26
The health and well-being standard	29
The positive relationships standard	34
The protection of children standard	38
The leadership and management standard	43
The care planning standard	47
Management and administrative regulations	51
Guidance on Part 3 of the regulations – Registered persons	51
Guidance on Part 4 of the regulations – Staffing	52
Guidance on Part 5 of the regulations – Policies, records, complaints and notifications	52
Guidance on Part 6 of the regulations – Management of the home	55
Glossary	56
ANNEX A – Behaviour management in children's homes	57
Physical intervention and use of restraint	57
Deprivation of liberty	60
Principles for assessing the quality of behaviour management in children's homes	60

Introduction

1.1 Children's homes provide support and care for some of our most vulnerable children and young people. We want each child in care to be provided with the right placement at the right time, so that residential care is a positive and beneficial choice for the children and young people living in children's homes.

1.2 This guide accompanies the Children's Homes Regulations 2015 and provides further explanation and information for everyone delivering residential care. The 2015 regulations include Quality Standards which set out the aspirational positive outcomes that we expect homes to be achieving for each child in their care and the underpinning requirements that homes must meet in order to achieve those overarching outcomes.

1.3 Many children placed in residential care will have highly complex and challenging needs. Their developmental-stage and abilities will determine their starting point when they are admitted to the home and the home may need to support them through a complex and extended period of transition before they are able to positively engage and develop. This should not limit the home's ambitions for each child. The requirements within the regulations and the information in this guide should be interpreted in the context of each individual child's needs.

Principles for residential care

1.4 The principles upon which residential care is built are important elements that underpin the regulations and this guide. We would expect all homes to apply and demonstrate the principles below, and to ensure that residential care is a positive choice for those children and young people where a children's home is the best setting to meet their individual needs.¹

¹ These principles have been proposed by the Independent Children's Homes Association (ICHA) and Institute of Education (IoE) and developed through consultation.

The principles of residential care

Children in residential care should be loved, happy, healthy, safe from harm and able to develop, thrive and fulfil their potential.

Residential care should value and nurture each child and young person as an individual with talents, strengths and capabilities that can develop over time.

Residential care should build positive relationships; establishing strong bonds with children and young people on the basis of jointly undertaken activities, shared daily life, domestic and non-domestic routines and established boundaries of acceptable behaviour.

Residential care should be ambitious, nurturing young people's school learning and out-of-school learning and ambitions for their future.

Residential care should be attentive to need, attending to young people's emotional, mental and physical health needs, such as repairing earlier damage to self-esteem and supporting friendships.

Residential care should be outward facing, working with the wider system of professionals for each child, and with children and young people's families and communities of origin to sustain links and understand past problems.

Residential care homes should have high expectations of staff as committed members of a team, as decision makers, as activity leaders, and engaged in on-going learning about their role and the children, young people and families they work with.

Residential care should provide a safe and stimulating environment in high-quality buildings, spaces that support nurture and privacy as well as common spaces, and spaces to be active.

The diversity of children's homes settings

1.5 Children's homes provide care for children and young people with a very diverse range of needs. The regulations hold a high ambition for all children in a children's home, but recognise the acute differences between vulnerable adolescents who have had traumatic life experiences and children with complex special educational needs and disabilities that mean they cannot live with their family.

1.6 There is also a diversity in settings, with care being provided in, for example: secure units, small houses, or campuses which feature a number of homes but also have a school on site. In addition, the regulations cover short break provision for children with complex disabilities or health needs, where children's primary carers remain their families but they stay at a home for short periods of time.

1.7 With this in mind, it is important that the registered person meets the regulations according to the needs of their children and the role and aims of the home, as set out in their Statement of Purpose. This guide identifies specific regulations where a home's approach may need to be different because of the purpose of the home and/or the needs of the children they care for.

About the Quality Standards

1.8 The Quality Standards set out in regulations the outcomes that children must be supported to achieve while living in children's homes. Each standard has an aspirational, child-focused outcome statement, followed by a clear set of underpinning, measurable requirements that homes must meet to achieve the standard.

1.9 The regulations prescribe nine Quality Standards for children's homes:

- 1. The quality and purpose of care standard**
- 2. The children's wishes and feelings standard**
- 3. The education standard**
- 4. The enjoyment and achievement standard**
- 5. The health and well-being standard**
- 6. The positive relationships standard**
- 7. The protection of children standard**
- 8. The leadership and management standard**
- 9. The care planning standard**

1.10 Collectively these nine standards are the Quality Standards for each home. However they are referred to individually in this guide as "the education standard", and so on.

1.11 Regulation 5 runs across the Quality Standards. It sets out the requirement that children's homes must seek to work with those in the wider system to ensure that each child's needs are met.

Who is this guide for?

1.12 This guide is for all those involved with the care of children in children's homes and particularly those who are subject to the Children's Homes Regulations 2015.

1.13 The regulations are deliberately drafted to make the "registered person" accountable – this means the registered provider or registered manager depending on

how they organise the running and management of the home (see glossary for further information). The language of the guide follows this definition.

The regulatory framework and legal status of this guide

1.14 The Children's Homes Regulations 2015 set out what registered providers, responsible individuals and children's homes managers must do by law.

1.15 This guide is a statement published pursuant to section 23 of the Care Standards Act 2000. It explains and supplements the regulations (pursuant to section 23(1A) of the 2000 Act). It provides explanations of terms used in the regulations, clarifies what is expected for the various requirements of the regulations to be met and signposts some of the relevant statutory and non-statutory guidance.

1.16 The registered person must have regard to this guide in interpreting and meeting the regulations (regulation 17). Ofsted must also have regard to this guide in regulating children's homes.

How this guide works

1.17 This guide is divided into two sections. Section 1 covers the Quality Standards. For each standard it provides:

1. the text of the regulation;
2. explanations of specific terms in the regulation; and
3. guidance that supplements the regulation.

Section 2 provides guidance to supplement the management and administrative regulations (Parts 3 to 6 of the Children's Homes Regulations 2015).

1.18 The guide is not a comprehensive and exhaustive set of instructions for managing a children's home, and has intentionally been kept to a minimum. Many parts of the regulations speak for themselves and so the guide does not provide further information on them. The presence or absence of a reference to any part of the regulations in the guide does not have any bearing on the regulation's status – children's homes providers are required to meet all of the regulations.

1.19 Similarly the guide attempts to signpost those involved with the administration of children's homes to publications, research and guidance of interest. Such references are not intended to be exhaustive. It remains the responsibility of those running children's homes to seek out the relevant material to ensure that they comply with the law, and provide children with the best possible care.

Inspection

1.20 Ofsted is the regulator for children's homes. There are four elements to Ofsted's function as a regulator: registration; inspection; compliance; and enforcement. Across all its work, Ofsted has three core statutory responsibilities: to ensure that inspection supports improvement in the services Ofsted inspects and regulates; that it is centred on the needs of users; and that it promotes the effective use of resources.²

1.21 The purpose of Ofsted's inspection of children's homes is to assess the quality of care being provided for children and young people. Inspection focuses on the outcomes which they are being supported to achieve. It tests compliance with the relevant regulations, and has regard to this guide.³

1.22 Following inspection, inspectors will make a number of judgements, including a judgment on the overall effectiveness of the home inspected. If inspectors identify a failure to meet a regulation, Ofsted will set requirements that the registered person must meet. In determining whether a regulation has been met, Ofsted will take into account how the registered person is following this guide. Any failure to meet regulations may lead to consideration of enforcement action. Inspectors will also make recommendations for improvement.

² Section 117 of the Education and Inspections Act 2006.

³ Ofsted's new framework for inspection of children's homes: [link to be added when available]

The Quality Standards

Regulation 5 - engaging with the wider system to ensure each child's needs are met

The text of the regulation

5. In meeting regulations 6 to 14, the registered person must, and must ensure that staff—
- (a) seek to involve each child's placing authority effectively in the child's care, in line with the child's relevant plans;
 - (b) seek to develop and maintain an effective working relationship with all relevant persons—
 - (i) involved in the care and protection of children in the area where the children's home is located;
 - (ii) in relation to each child's care, to seek to secure the input and services required to meet each child's needs;
 - (c) if the response of the placing authority or any of the relevant persons is inadequate in relation to their role, challenge them to seek to ensure that each child's needs are met in line with their relevant plans.

2.1 This regulation sets out overarching requirements that run across all of the Quality Standards.

Explanation of terms in the regulation

2.2 The following descriptions explain terms used in the regulation in accordance with s.23(1A) of the 2000 Act.

'relevant plans'

2.3 This is defined in the interpretation section of the regulations. Throughout the regulations, it means the child's placement plan and if one has been prepared in relation to that child, the care plan, statement of special educational needs and Education, Health and Care (EHC) plan. For a child who has been remanded or sentenced to custody and placed in a secure children's home, the home must have regard also to their "sentence plan" and "detention placement plan".⁴

'relevant persons'

2.4 Any individual, organisation, establishment, agency or service provider involved in the care or protection of a child living in the home and/or of children in the area where the home is located.

⁴ A "sentence plan" is prepared by the Youth Offending Team for the child, as required by the Youth Justice Board's National Standards for Youth Justice Services. A "detention placement plan" is prepared by the local authority for the child.

‘seek to’

2.5 The registered person must make every effort to effectively engage and work with relevant persons involved in children’s care with the aim of making sure that each child’s needs are met. A home cannot force a relevant person to engage or work productively with them and the regulation does not require this. Instead it requires the registered person and the home’s staff to do everything within their power to engage others effectively. They should be able to evidence what they have done for this, including any actions taken to escalate concerns.

Guidance

2.6 To meet the aspirations embodied in the Quality Standards, children’s homes need to connect with and become part of the wider system for each child in their care. No children’s home will be able to meet all of a child’s needs alone. It is crucial that the home works in close partnership with the child’s family, local authority and statutory social worker in particular – by playing its part fully in the best interests of the child, and by proactively advocating for the child to ensure that others play their role in the same way. Such partnership work is essential before the child arrives, while the child lives in the home, and where the child prepares to transition to another setting or leaves care.

2.7 Regulation 5(a) requires homes in particular to work with the local authority that places a looked-after child in the home, which in practice means working primarily with their statutory social worker.⁵ This requirement is repeated at other places in the regulations and guide, but in this instance the duplication is a justifiable reinforcement in light of the crucial importance of a strong working relationship between the home and the authority with parental responsibility for a child placed there. Not all children in homes are looked-after – for these children too, a close working relationship is essential with those with parental responsibility for them, usually their parents or other carers.

2.8 There will also be cases where a home needs to engage with more than one local authority. For example, if a looked-after child is placed in a home in a different area, or a child accesses education or other provision in a different area to that of the home.

2.9 Beyond local authorities, there are many other agencies that have responsibilities towards children in children’s homes. Many of these are referenced specifically elsewhere in the regulations and guide. They might include health and education services, Local Safeguarding Children Boards, the police and youth offending teams. This list is not exhaustive. The important thing is that homes take the initiative in identifying others who must play a part for the children, engage with those bodies proactively and energetically, advocating for the children in their care.

2.10 Where the placing authority or another relevant person does not provide the services needed to meet a child’s needs, the home should pro-actively challenge them and continue to do so until the child’s needs are met. Homes should act as champions for

⁵ Section 23ZA Children Act 1989 and Part 5 Care Planning, Placement and Case Review (England) Regulations 2010.

their children, expecting nothing less than a good parent would. The registered person should be able to evidence their efforts to engage others, and use this to escalate a continued lack of engagement and seek action.

Secure children's homes

2.11 For children remanded or sentenced to custody and placed in a secure children's home, the home should ensure that they seek to establish effective working relationships with the Youth Justice Board and relevant youth offending teams, as well as each child's parents/carers or other responsible authority.

Short break settings

2.12 Regulation 5(b) does not apply to short break settings. Children are only in these settings for short periods of time and their placing authority (i.e. usually their parents/carers) remains responsible for their wider care. However, short break settings should seek to build relationships with others involved in the child's care in so far as this is appropriate given their limited role within the wider system for the child.

The quality and purpose of care standard

The text of the regulation

6. —(1) The quality and purpose of care standard is that the registered person—
- (a) understands the home’s overall aims and the outcomes it seeks to achieve for children;
 - (b) uses this understanding to deliver high quality care that meets children’s needs and supports them to achieve their potential;
 - (c) ensures that staff fulfil (a) and (b).
- (2) The quality and purpose of care standard is met if—
- (a) the registered person has and communicates, and ensures that staff have and communicate, a shared understanding of—
 - (i) the range of needs of children for whom it is intended that the home is to provide care;
 - (ii) the outcomes for children that the home aims to achieve;
 - (iii) how the home operates to achieve those outcomes;
 - (b) the understanding referred to in sub-paragraph (a)—
 - (i) is consistent with the home’s statement of purpose; and
 - (ii) informs the performance by the registered person of their obligations under sub-paragraph (c);
 - (c) the registered person ensures that staff—
 - (i) protect and promote each child’s welfare;
 - (ii) treat each child with dignity and respect;
 - (iii) provide personalised care that meets each child’s needs as recorded in his or her relevant plans and takes account of his or her background;
 - (iv) support each child to manage the consequences of any experiences of abuse or neglect;
 - (v) support each child to develop resilience and skills that prepare him or her, as the case may be, to return home, to live in a new placement or to live independently as an adult;
 - (vi) provide physical necessities, including personal items, for each child;
 - (vii) make appropriate and reasonable decisions about the day-to-day arrangements for each child, in line with the child’s relevant plans, which give the child an appropriate degree of freedom and choice;
 - (d) the registered person ensures that the premises used for the purposes of the home are designed and furnished in such a way that—
 - (i) they meet the needs of each child;
 - (ii) they enable each child to participate in the daily life of the home;
 - (iii) they enable each child to participate in the daily life of the community of the area in which the home is located;
 - (iv) each child’s privacy is appropriately protected;
 - (v) each child can access all appropriate areas of the premises;
- (3) If the registered person places a limitation on a child’s privacy or access to areas of the home’s premises (see sub-paragraphs (d)(iv) and (v)), the registered person must ensure that any such limitation is—
- (a) intended to safeguard the child’s welfare;
 - (b) necessary and proportionate to the child’s needs; and
 - (c) kept under review and revised where appropriate.

Explanation of terms in the regulation

3.1 The following descriptions explain terms used in the regulation in accordance with s.23(1A) of the 2000 Act.

‘personalised care’

3.2 In providing care to meet each child’s needs and promoting their welfare, the home should take account of the child’s sex, religious persuasion, racial origin, and cultural and linguistic background, any disability, their assessed needs, previous experiences and any relevant plans.

‘emotional well-being’

3.3 Well-being includes, but is not confined to: children’s sense of being a valued person (sense of self-esteem); and understanding their sense of personal identity and how this relates to their relationship with their families and significant others. It is necessary for care givers to appreciate and understand the needs of the child in the context of their ethnicity, religion, language and culture.

3.4 Care that supports well-being includes:

- being personal to the child, tailored to his/her needs, putting the child’s needs at the centre;
- offering opportunities to explore and make sense of his/her identity;
- supporting contact with the child’s family and significant others, where this is assessed as being in the child’s interests (this is likely to be particularly important if the child is not looked-after);
- offering continuity and security, wherever possible; and
- focusing on the child’s hopes, wishes and ambitions, striving to enable the child to reach his/her potential.

‘physical necessities’

3.5 Care that responds in a nurturing way to the child’s physical needs for nutrition, shelter and warmth.

‘resilience’

3.6 Qualities that enable a child to cope with and withstand challenges and difficulties, both mentally and emotionally.

Guidance

The Statement of Purpose (SoP)

3.7 The home’s Statement of Purpose (SoP) should be child-focused and set out how the care offered to each child by the home will meet the Quality Standards.

3.8 The approach and information set out in the SoP is essential to the process of agreement between the registered person and placing authority that a placement in that home is the right one for that child, and that the home will be able to respond effectively to the child's assessed needs. Emergency admissions should not be made unless the home's SoP and practice mean that it has the capability to support and care for children admitted at very short notice, including considering the impact on children already living in the home.

Meeting children's day to day needs

3.9 Children's home staff should take every step to make sure that individual children and young people are not subject to discrimination, marginalisation or ridicule from their peers by virtue of their gender, religion, ethnic origin, cultural background, linguistic background, nationality, disability, sexual orientation or for any other reason.

3.10 Children in residential care may be worried about being stigmatised or ridiculed by their peers for being "different" because of where they live. The home's environment and care should be designed to take account of this and staff should support children to talk about and help them address any concerns they have.

3.11 Many children in homes must undergo a difficult transition, and what should be simple aspects of their care take on a substantial significance in this context. Homes should provide a nurturing environment that is welcoming, supportive, and provides boundaries. It must also meet children's basic day to day needs and physical necessities – including, but not limited to, a clean environment, continuous access to drinking water, varied and nutritious food, clothing, hot water, bedding and so on. The home should seek to meet the child's basic needs in the way that a good parent would, recognising that many children in residential care have experienced environments where these needs have not been consistently met – doing so is an important aspect of demonstrating that the home cares for the child and values them as an individual.

3.12 For children's homes to be nurturing and supportive environments that meet the needs of their children, they will, in most cases, be homely, domestic environments. Safety measures (alarms etc.) should be consistent with a domestic setting and not create an 'institutional' impression.

3.13 Just as in a family home, there should not generally be restrictions on children's access to all areas of their home, unless limits are needed to protect their privacy or safety. Children should be able to access all shared areas of a home unless there are specific reasons why this would not meet children's needs. Restrictions may be put in place, for example, to keep files confidential or protect children from harming themselves or each other. The use of double or high door handles or the locking of outside doors or doors to hazardous areas may be acceptable as a safety measure and/or security precaution. Any decisions to limit a child's access to any area of the home and any modifications to the environment of the home in the interests of safety or security, must only be made where this is intended to safeguard the child's welfare. All decisions should be informed by a rigorous assessment of that individual child's needs and be kept

under regular review. Information on restraint and deprivation of liberty in relation to behaviour management is in Annex A pp. 59-63.

3.14 Children in residential care usually live in a group environment, and so it is particularly important that they can spend time away from other group members. Children's privacy should be respected.

3.15 Each child should have their own personal space which will usually be their bedroom. They should be provided with a locker or cabinet to securely store personal items, including any personal information. Children should have separate bedrooms and should not share a bedroom with an adult. It may be appropriate for siblings of the same sex to share. Children should be given some choice about how their personal space is decorated. Bedrooms should not generally be entered without children's permission, though it may be necessary to establish routines to allow for rooms to be cleaned and aired regularly. Usually, rooms should only be searched if children have been informed or asked for their permission. Immediate searching may be necessary where there are reasonable grounds for believing that there is a risk to children or a crime has been committed.

3.16 Children should be supported to express themselves as individuals and should be given an appropriate degree of freedom and choice in relation to day to day arrangements for their care, depending on their individual needs. This is in relation to both activities and personal items such as clothing, technology and leisure items. Children's reasonable preferences in relation to day to day arrangements should be met and where their preferences are unreasonable, staff should discuss this with the child to help them understand why.

3.17 Staff should enable children to develop an understanding of costs and budgeting through provision of pocket money or allowances depending on their age and developmental-stage.

3.18 Children should be able to maintain and develop their religious beliefs as far as practicable through attendance at services and instruction, and by observing religious requirements including dress and diet.

Location and design

3.19 The home should be located in an area that supports children's well-being and development. The location of the home should support its aims, objectives and ethos, as described in the SoP. (See Part 6 p. 57, para 15.1 for information on assessing the location of the home.)

3.20 The design of the home should include any necessary adaptation to meet the needs of children with disabilities or specific health issues.

3.21 The design of the home should, where relevant, enable children to develop independency skills within the supportive environment of the home, including through encouraging independent use of kitchen and laundry areas.

3.22 Staff should have access to suitable washing, kitchen and laundry facilities and sleeping accommodation where they are expected to stay in the home overnight.

Transition from the home

3.23 Staff must help each child to prepare for their transition from the home, whether they are returning home, moving to another placement or to live independently. This includes supporting the child to develop emotional and mental resilience to cope without the home's support and, where the child is moving to live independently, practical skills such as cooking, housework and personal self-care.

3.24 When a looked-after young person reaches the age of sixteen they become entitled to support as a 'care leaver'. Their pathway plan, developed and maintained by their local authority, should remain a "live document", setting out the different services and how they will be provided to respond to the full range of the young person's needs.

3.25 As they will have a day to day understanding of young people's capabilities and needs, children's homes staff will have a valuable contribution to make to the pathway planning process. They should actively seek to make the fullest contribution, working with other relevant persons.

3.26 For further information see *Children Act 1989: transition to adulthood for care leavers*:

[Children Act 1989: Transition to adulthood for care leavers](#)

Secure children's homes

3.27 This standard applies to secure children's homes. However, some requirements must be applied in such a way that the home can protect the safety of all children accommodated there and maintain the secure environment, particularly regulations 6(2)(c)(vii) and 6(2)(d)(iii),(iv) and (v).

3.28 For example, secure homes should allow children appropriate freedom and choice but this is likely to be very limited compared to other settings. Similarly, they should seek opportunities for children to participate in the life of the community, but the nature of the setting may constrain the opportunities that are appropriate and available. The provision of physical necessities, personal items and the above guidance on access to areas of the home must be interpreted according to the nature of the secure setting.

3.29 Any observation, monitoring or surveillance of children must not remove reasonable privacy, and should allow as much privacy as is possible, including in dressing, washing and using the toilet. A record must be kept of all observations in bedrooms to ensure that children are not subject to unnecessary invasions of their privacy. Where homes have CCTV or other monitoring equipment, there should be a written policy describing how surveillance will support children's needs and interests, and, if appropriate, protect staff.

3.30 A young person who reaches the age of 18 and is accommodated in a secure children's home because they were remanded or sentenced to youth detention may

transition directly into the adult prison estate. Transition preparation for the change of environment will need to be planned in conjunction with the receiving prison, the youth offending team and other agencies involved with the young person.

Residential special schools and short break settings

3.31 This standard applies to residential special schools and short break settings. However, some of the requirements must be applied in such a way that homes are able to protect and meet the needs of all children accommodated in them (particularly in relation to children's complex special educational needs and disabilities).

3.32 For example, children should have whatever freedom and choice can be granted to them, but in the interests of each child this may need to be limited compared with other settings. Similarly, the above guidance on access to areas of the home must be interpreted according to the needs of each child accommodated there which may result in having more restrictions on access than in other settings.

3.33 Children in short break provision do not transition to other placements in the manner envisaged by regulation 6(2)(c)(v) and so this does not apply to these settings. However, settings should support children both to leave the home smoothly at the end of each stay, and eventually permanently or when they move to another provider (see regulation 14 and p. 50, para 11.9).

The children's wishes and feelings standard

The text of the regulation

7.—(1) The children's wishes and feelings standard is that staff—

- (a) engage with children; and
- (b) take children's wishes and feelings into account,

about matters affecting children's care and welfare.

(2) The children's wishes and feelings standard is met if—

- (a) the registered person ensures that staff—
 - (i) seek, consider and, where possible, act upon each child's wishes and feelings in relation to decisions about his or her care and welfare;
 - (ii) regularly consult children, and seek their feedback, about the quality of the home's care;
 - (iii) explain to each child how his or her wishes and feelings have been taken into account and give reasons for decisions;
 - (iv) support each child to express his or her wishes and feelings, including through specialist support where appropriate;
 - (v) explain to each child how his or her confidentiality will be respected and the circumstances when it may have to be set aside;
 - (vi) assist each child to prepare for a care and placement review and to make his or her wishes and feelings known for the purposes of a review;
- (b) the registered person ensures that each child—
 - (i) is enabled to provide feedback to, and raise issues with, an appropriate person about the support and services the child receives;
 - (ii) is given access to and an explanation of the home's children's guide when he or she is admitted to the home;
- (c) the registered person—
 - (i) keeps under review and, where appropriate, revises the children's guide;
 - (ii) if the children's guide is revised, gives each child access to the revised guide and an explanation of the changes;
- (d) the registered person ensures that—
 - (i) an explanation is given to each child, having regard to his or her age and understanding, as to how to make a complaint or representations in relation to the home or the care he or she receives and how any such complaint or representations will be dealt with;
 - (ii) arrangements are in place to enable children to have access to advocacy support to ensure their voice is listened to;
- (e) the registered person ensures that the views of others with a significant relationship to each child, including family members, are regularly sought and taken into account in line with relevant plans.

Explanation of terms in the regulation

4.1 The following descriptions explain terms used in the regulation in accordance with s.23(1A) of the 2000 Act.

‘Advocacy support’

4.2 Advocacy is the process of making representations on behalf of the child. All residential care staff will need to have skills to liaise and negotiate with services on behalf of children in their care and, in this sense, to offer advocacy.

4.3 Children must be able to access independent advocates to support and advise them and ensure they have the support needed to express their views, wishes and feelings at meetings about their care.

‘appropriate person’

4.4 An appropriate person includes the child’s statutory social worker, advocate, Independent Reviewing Officer (IRO) or other professionals involved in their care.

Guidance

4.5 The principle of listening to the child and taking their views into account when planning and undertaking their care applies to all children, including children with disabilities, special educational needs or other complex needs. Children should be given the opportunity to participate in and shape the overall ethos, nature and routine of the home they live in. They should be given information, appropriate explanations and choices about daily life in the home and the wider plan for their care.

Working in partnership with others

4.6 Section 22(5) of the Children Act 1989 and *Children Act 1989: Care planning, placement and case review* set out in detail the local authority’s responsibilities with regard to seeking and taking into account a child’s wishes and feelings when they are looked-after:

[Children Act 1989: Care planning, placement and case review](#)

4.7 The home should work in partnership with the local authority and parents/carers of each child in their care as appropriate to ensure that children are provided with support (appropriate to their age and understanding) to communicate their views, wishes and feelings and participate as fully as possible in all aspects of their care planning and daily care. This may include the use of suitable aids, equipment and language support.

4.8 For children who are looked-after, the placing authority will have decided the level of family involvement that is appropriate and recorded this in the care plan. Children’s homes must follow regulation 7(2)(e) in accordance with this decision. In contrast, for non-looked-after children and especially those placed by their parents/carers in residential special schools or short break provision, the home is likely to need to seek frequently the views and involvement of parents/carers and others with a significant relationship to the child.

Taking children's views, wishes and feelings into account in their daily care

4.9 In some instances, individual children may express wishes about their daily care that are not always in their best interests or which may conflict with the views of other children in the home. In such circumstances, the responsible adults will have to reach a reasonable view about the best way forward in the interests of all. The reasons for reaching any decision will need to be carefully explained to the children concerned.

4.10 Staff need the skills and confidence to communicate easily and understand the importance of listening to, involving and responding to the children they care for. Staff should understand they have a responsibility to observe, notice and respond to children who are expressing their views, acknowledging that it is not the sole responsibility of the child to 'tell'. They should also understand how children might communicate their feelings through their behaviour, especially where the child has a disability which means they cannot communicate as others might.

4.11 Children should be consulted regularly on their views about the home's care, with this information used to support continued improvement in the quality of care provided. Children should be able to see the results of their views being listened to and acted upon.

4.12 Staff should ensure that each child understands the home's procedures and policies for respecting their confidentiality and also when it will not be possible to preserve this – e.g. where protecting a confidence puts others at risk.

4.13 Home should encourage children to share any concerns about their care or other matters as soon as they arise. Good communication and involvement of children in the day to day life of the home should stop concerns from reaching complaint level in most cases. Regulation 41 outlines the requirements on the registered person for having a formal complaints procedure.

4.14 The registered person and the home's staff must be familiar with the care planning process for looked-after children and must assist them to prepare for meetings, chaired by the child's IRO, to review the plan for their care. Staff should play an important role in these meetings, including supporting the child and enabling a clear understanding to be reached about the child's views, wishes, feelings, and expectations for their future

4.15 The registered person should provide opportunities and support for children to engage with their local Children in Care Council, or other such local arrangements, which enable the views and experiences of children in care to be heard on a local level.

Advocacy support

4.16 There is a legal requirement for the IRO of a looked-after child to ensure that the child understands they have an entitlement to advocacy support (*Chapter 3, IRO Handbook*) and this support should be arranged by the child's local authority. Staff should complement this by explaining to each child how to access an advocate, and regularly reminding them of their right to do so, so they understand they can access support from an adult if they wish to complain or make representations about the care offered by the home.

4.17 Homes caring for non-looked-after children should also ensure that they are able to access advocacy support if requested.

4.18 Children should be informed of how to contact the Office of the Children's Commissioner for advice and assistance about their rights.

4.19 *Get it Sorted (2004) Guidance on Providing Effective Advocacy Services for Children and Young People making a Complaint under the Children Act 1989* (which will include looked-after children who live in children's homes) is available at:

[Get it Sorted \(2004\) Guidance on providing effective advocacy services for children and young people making a complaint under the Children Act 1989](#)

Producing a 'Children's Guide'

4.20 The children's home must produce a 'Children's Guide' to help the children in their care understand what happens in the home. The children's guide must be made available to all children when they are admitted to the home (and may be given to them beforehand).

4.21 The children's guide must be age appropriate, accessible and as a minimum should set out a summary of the Statement of Purpose (SoP), the home's complaints procedure, and how children can access advocacy support. It should include contact information for the Office of the Children's Commissioner.

4.22 The guide must be produced in a format appropriate to the communication needs of the children placed in the home and should be explained to each child to make sure they understand it. It could be primarily in electronic format if this is considered most appropriate to meet children's needs.

4.23 As part of reviewing and revising where appropriate the SoP (regulation 18(3)), the registered person should review and make any necessary changes to the children's guide.

Disabled children and children who cannot communicate

4.24 Disabled children and children who cannot communicate due to trauma have the right to have their views, wishes and feelings heard and respected in the same way as other children. There may be children whose abilities are such that regulations 7(2)(a)(v), (b) and (d)(i) will need interpretation according to the circumstances of the child, in consultation with their placing authority.

The education standard

The text of the regulation

8.—(1) The education standard is that children make measurable progress towards achieving their educational potential and are supported to do so by the home.

(2) The education standard is met if the registered person ensures that—

(a) staff—

- (i) support each child’s learning and development, including support with homework where appropriate;
- (ii) support each child to achieve his or her education, learning and training goals, as recorded in his or her relevant plans;
- (iii) understand the barriers to learning that each child may face;
- (iv) communicate the value of education and training to each child;
- (v) support each child to engage in activities which promote learning outside of formal education and training provision;
- (vi) maintain regular contact with each child’s education and training provider, including engaging with the provider and the placing authority to support his or her education and training and to maximise his or her achievement;
- (vii) where they become aware of any need for further assessment or specialist provision with regard to a child, raise this with the child’s education or training provider and the placing authority;
- (viii) support each child who is above compulsory school-age to participate in further education, training or employment and to prepare for future higher education or employment;
- (ix) support a child who is excluded from school, or of compulsory school age but not attending school, to—
 - (aa) access educational and training support throughout the time that he or she is so excluded or otherwise not attending school; and
 - (bb) return to school as soon as possible;

(b) each child—

- (i) regularly attends education or training provision in line with his or her relevant plans;
- (ii) has access to a range of equipment, facilities and resources to support his or her learning.

Explanation of terms in the regulation

5.1 The following descriptions explain terms used in the regulation in accordance with s.23(1A) of the 2000 Act.

‘relevant plans’

5.2 The references to ‘relevant plans’ will include the Personal Education Plan (PEP) for looked-after children. The PEP is the information required about the looked-after child’s educational needs to be included in the child’s care plan.⁶

⁶ Regulation 5(b)(2) and Schedule 1(2) of the Care Planning, Placement and Case Review Regulations 2010.

‘Measurable progress’

5.3 Educational attainment and progress can be measured and evidenced in various ways, including but not limited to: success in academic, vocational and other awards and qualifications; other formal attainment tests that are part of national assessment arrangements; and teachers’ ongoing assessments. Measurements of progress should consider how well the child is being prepared for their next stage of education, training or employment, given their starting point and individual needs. Other metrics can also be taken into account such as rewards and recognition of achievements, improvements in attendance and, where appropriate, reduction in behavioural incidents including exclusion. The child’s personal circumstances and history are relevant in considering what might constitute suitable evidence of progress, but progress measures should include quantitative data where available.

Guidance

Understanding barriers to learning

5.4 For some children who have experienced severe trauma, have mental health difficulties or have been excluded or out of education for significant periods, it may be necessary to address and work through their past experiences and present needs before they can positively participate in learning activities and formal education. Staff in children’s homes will play a key role in supporting these children in line with recommendations from education and health professionals.

5.5 A high proportion of children in children’s homes have special educational needs (SEN) (a recent research study found 38% to have a statement of special educational needs) and staff need to understand the specialist support they may need to be able to engage positively and achieve in education.⁷ Staff must be aware of whether a child has a statement of SEN or an Education, Health and Care (EHC) plan and the information in it. An EHC plan details the education, health and social care support that is to be provided to a child or young person who has SEN or a disability. For further information see the *SEND Code of Practice: 0 to 25 years*:

[SEND Code of Practice: 0 to 25 years](#)

Working in partnership with others

5.6 Local authorities have a legal duty to promote the educational achievement of their looked-after children and secure a school place for them. Their responsibilities as corporate parent apply wherever the child is placed. When commissioning a placement in a children’s home the placing authority must establish how the home will support the child’s educational needs.

⁷ Living in Children’s Residential Homes, 2012: Berridge, D., Biehal, N. and Henry, L., Research Report, DFE-RR201.

5.7 *Promoting the Education of Looked-After Children* describes how local authorities are expected to comply with their duties to promote the education of looked-after children:

[Promoting the education of looked-after children](#)

5.8 This guidance includes information about how carers, such as children's homes staff, are expected to contribute to support for children to achieve their education and learning goals.

5.9 For children who are not looked-after, parents/carers (or others with parental responsibility) are responsible for selecting the child's education placement.

5.10 The home's staff need to know, for every child in their care, what level of decision making has been delegated to them in relation to the child's education. These delegations should be recorded in the child's placement plan and it is the joint responsibility of the registered person and the placing authority to agree this at the time of placement. The Education Act 1996 defines 'parent' as including a person who has care of the child in question. Therefore, for a looked-after child, their residential care worker is deemed a parent for the purposes of education law. This means that they should be treated like a parent with respect to information provided by a school about the child's progress; should be invited to meetings about the child; and should be able to give consent to decisions regarding school activities unless there are good reasons not to delegate these decisions to them. For further information see the *Statutory guidance on entrusting decision making to carers of looked-after children*:

[Statutory guidance on entrusting decision making to carers of looked-after children](#)

5.11 Staff should have sufficient understanding of the relevant local education administration, including the functions of the role of designated teachers for looked-after children and the Virtual School Head (VSH) in their area. They may also need to know about the VSH in other local authority areas – if a looked-after child from a different local authority area is placed in the home, the VSH of that local authority remains responsible for promoting the child's educational achievement.

5.12 The home's staff need to have the knowledge and skills to understand each child's education and training goals and their next steps for learning. If a child's progress is not in line with their agreed goals or next steps, staff should seek expert advice from education professionals, such as the VSH, SENCO, learning mentor or teacher. The home should challenge the child's education or training provider if they do not receive sufficient support to progress as outlined in their relevant plans.

5.13 The home should have systems and processes that enable staff to share their experience and understanding of the child's needs and educational progress with other services.

5.14 Children's home's staff need to be able to act as effective advocates for or on behalf of a child who may be experiencing difficulties in dealing with education or training

matters including, but not limited to, attainment, admissions, attendance or conduct, as a good parent would do.

Participating in education or training

5.15 The starting assumption is that children should be in full-time education whilst they are of compulsory school age, unless their PEP states otherwise.

5.16 Where children placed in a home are not participating in education because they have been excluded or are not on a school roll for some other reason, the registered person and staff should work closely with the placing authority so that the child is supported and enabled to resume full-time education. In the interim, the child should be supported to sustain or regain their confidence in education and be engaged in suitable structured activities.

5.17 The Government has raised the participation age (RPA) so that all young people in England are now required to continue in education or training for a further year beyond the statutory school leaving age. The participation age will rise again to the young person's 18th birthday in summer 2015. Young people can choose how to participate – this can be through full time education, an apprenticeship or traineeship, or by combining full-time employment with part-time education or training. Whilst the duty is on the young person themselves, it is important that children's homes' staff encourage them to continue their education or training. They can also point them to the financial support that is available through the 16-19 Bursary Fund and to their local authority young people's services who can advise about the options available in the local area. For further information on the 16-19 Bursary Fund see:

[Overview of 16 - 19 bursary fund](#)

5.18 Local authorities have a number of responsibilities in relation to education and training for 16-19 year olds, including ensuring that sufficient provision is available to meet their needs and supporting them to participate. They are also responsible for identifying young people covered by the duty to participate who are not in education or training. Children's homes should work with the local authority to make sure the young people they are responsible for are getting the support they need to participate. For further information see *Participation of young people: education, employment and training*:

[Participation of young people: education, employment and training](#)

The home learning environment

5.19 The ethos of the home should support each child to learn, emphasising the value of independent study and reading support. The home should make available suitable facilities, equipment and resources for this. Staff should support children with homework. The home's routines should be arranged so that there is no barrier to children making use of all the home's educational resources.

5.20 Children should have access to a computer and the internet to support their education and learning, unless there are specific safeguarding reasons why this would be inappropriate. In such cases, the home should consider whether and how it can support the child to access a computer and the internet safely.

Children's homes that are also registered as schools, and secure children's homes

5.21 The homes' education provision will be subject to separate regulation, guidance and inspection.

5.22 Just as regulation 8(2)(a)(vi) seeks to ensure partnership between the education provider and the home, where these are one and the same the registered person should ensure that there is a mutually supportive and reinforcing approach between the two aspects of provision that is centred around the child. The two aspects of provision should be able to challenge each other where necessary. The home should have processes of plan and review in place to ensure this is the case.

Short break settings

5.23 Regulations 8(2)(a)(vi), (vii), (ix) and (b)(i) do not apply to children receiving short breaks. The remainder of the education standard does apply, but should be applied in a manner that is appropriate to the type of services being provided in short break settings.

5.24 The registered person should ensure that staff understand the education plans for each child and that they agree with the placing authority (usually the child's parents/carers) the approach to be taken to meeting goals for each child in the time that the child spends in the home. However, the registered person and staff are not expected to go beyond this remit given that education remains the principal responsibility of the child's placing authority.

The enjoyment and achievement standard

The text of the regulation

9.—(1) The enjoyment and achievement standard is that children take part in and benefit from a variety of activities that meet their needs and develop and reflect their creative, intellectual, physical and social interests and skills.

(2) The enjoyment and achievement standard is met if the registered person ensures that—

- (a) each child has access to a range of activities that enable the child to pursue his or her individual hobbies and interests;
- (b) staff support each child to—
 - (i) develop his or her interests and skills through activities available inside and outside the home;
 - (ii) participate in activities inside and outside the home that he or she enjoys and which meet and expand his or her interests and preferences;
 - (iii) make a positive contribution to the home and the wider community;
 - (iv) make and sustain friendships with children inside and outside the home.

(3) The registered person must take each child's relevant plans into account when carrying out the obligations in paragraph (2), but those plans are not to limit the steps that the registered person may decide to take in order to meet those obligations.

Explanation of terms in the regulation

6.1 There are no additional specific explanations given for this standard.

Guidance

Working in partnership with others

6.2 Each child's placement plan should set out the permissions that their placing authority has delegated to the registered person. This should provide clarity on the home's ability to give permission for school trips, sleep-overs or the child's involvement in sporting, leisure and cultural activities. Wherever possible the home should secure the appropriate authority to support children to be involved in the same positive activities as their peers.

6.3 *Statutory guidance on entrusting decision making to carers of looked-after children* contains further information about delegating authority for decision making on behalf of looked-after children:

[Statutory guidance on entrusting decision making to carers of looked-after children](#)

Supporting children to enjoy life and have fun

6.4 Children's homes should seek to identify and provide appropriate opportunities for children that enable them to grow and develop, as part of the home's plan for their care. Each child's talents and interests should be understood and nurtured, with children selecting activities based on their personal preferences and abilities, so far as is reasonable.

6.5 The registered person should ensure that children are offered a wide range of opportunities and encouraged to participate in fun and enjoyable activities. Staff should support children to take part in school trips, clubs, volunteering and leisure activities.

6.6 Children should be supported to spend time with their friends in the local community, in their home area, and by having friends visit them at the home, in line with the child's plans, age and stage of development. Staff should be skilled in understanding the range of influences that friendships can have and should encourage those with a positive impact and discourage those with a negative impact. Homes that care for children who have, or are likely, to sexually offend should establish the extent to which friendships can be supported, in line with their relevant plans and subject to the safety of all concerned.

6.7 Decisions about overnight stays with friends should be delegated to children's homes staff by the placing authority for looked-after children and the delegated authority recorded in the placement plan. Powers to carry out DBS checks on adults in private households where children may be invited to stay overnight do not exist. Where children wish to stay overnight with friends, staff should make the same kind of checks that responsible parents might make in similar circumstances to seek reassurance that it is an appropriate place for a child to stay overnight.

6.8 Staff should ensure that children are well connected with local services and participate in activities in their community. Children should have access to 'leisure passes' and other opportunities to engage with the cultural, sporting and leisure activities available to other children in the community where the home is located.

6.9 Staff should recognise the personal achievements of their children and celebrate these both individually and collectively.

Secure children's homes

6.10 The range of opportunities for children in secure homes is limited compared to other settings by the nature of the secure setting. The references in (9)(2) to activities and friendships *outside* of the home do not apply.

6.11 Secure homes should still offer opportunities for enjoyment and achievement, and encourage young people to participate and develop their skills and interests, as part of the plan for their care. This type of activity will be particularly important to their rehabilitation and preparation for living back in the community. In addition, secure homes should consider how they can support children to sustain the friendships they already have with children outside of the home, for example encouraging friends to visit if it would meet an expressed need of the child in secure care.

Homes for children with disabilities

6.12 Children with disabilities or illnesses may be physically restricted, meaning that participation in community activities, or friendships in the community, are challenging or in some cases not advisable. The registered person should assess what is achievable and reasonable for each child, in line with their relevant plans, and ensure appropriate

opportunities are available for each child to have fun, form friendships and enjoy life, relative to the child's developmental-level and individual needs.

Short break settings

6.13 The nature of short break settings means that the reference in (9)(2)(b)(iv) to maintaining and sustaining long-term friendships outside of the home do not apply. However short break settings have an important role to play in extending and increasing the opportunities available to children using their service. This includes supporting them to form new friendships within the setting where appropriate and to sustain friendships that they have developed outside of the setting.

The health and well-being standard

The text of the regulation

10.—(1) The health and well-being standard is that—

- (a) the emotional, mental and physical health and well-being needs of children are met;
- (b) children receive advice, services and support in relation to their health and well-being;
- (c) children have healthy lifestyles.

(2) The health and well-being standard is met if the registered person ensures that—

(a) staff support each child to—

- (i) achieve personalised objectives for his or her health and well-being as recorded in his or her relevant plans;
- (ii) understand his or her health and well-being needs and to make informed choices and decisions about his or her health and well-being;
- (iii) take part in activities which meet his or her emotional, mental and physical health and well-being needs;
- (iv) develop skills to maintain a healthy lifestyle;
- (v) develop his or her understanding of personal, sexual and social relationships, and to responsibly enter into relationships appropriate to his or her age and development;

(b) each child registers as a patient with a general medical practitioner;

(c) each child has access to such dental, medical, nursing, psychiatric and psychological advice, treatment and other services, as he or she may require;

(d) when a specialist health intervention is arranged for a child—

- (i) the child's clinician and placing authority are involved in the arrangements, kept informed throughout and, where appropriate, their prior approval has been obtained;
- (ii) it can be demonstrated that the intervention meets the needs of that child;
- (iii) the person delivering the intervention satisfies the requirements in paragraph (3).

(3) The requirements are that the person delivering the specialist health intervention—

- (a) has appropriate experience, qualifications and skills;
- (b) is legally entitled to practise;
- (c) will do so in a way that is appropriate and safe for the child.

(4) In this regulation “specialist health intervention” means a health intervention which is arranged for the child by someone other than the child's clinician or placing authority.

Explanation of terms in the regulation

7.1 The following descriptions explain terms used in the regulation in accordance with s.23(1A) of the 2000 Act.

‘relevant plans’

7.2 The references to ‘relevant plans’ will include a looked-after child's ‘individual health plan’. This is the information required about the looked-after child's health needs to be included in their care plan.⁸

⁸ Section (7) and Schedule 1(1) of the Care Planning, Placement and Case Review Regulations 2010.

'healthy lifestyles'

7.3 Healthy lifestyles relate to the choices that can be made about health influencing factors such as nutrition, exercise, managing long-term conditions, mental health, sexual relationships, sexual health, contraception and use of drugs, alcohol and tobacco.

Guidance

7.4 The registered person and staff are responsible for children's day to day health and well-being. The children's home should be an environment that nurtures children's physical, mental and emotional health, following the approach set out in the Statement of Purpose (SoP).

Working in partnership with others

7.5 The responsible local authority must make sure that all its looked-after children are provided with appropriate, high-quality health care. The health of looked-after children must be assessed at regular intervals and the child's care plan must include an individual health plan setting out the approach that the local authority will follow to meet the full range of the child's health needs. Details of the local authority's responsibilities for the health of looked-after children are set out in *Children Act 1989: Care planning, placement and case review*:

[Children Act 1989: Care planning, placement and case review](#)

7.6 Information about the statutory obligations and duties on local authorities, Clinical Commissioning Groups (CCGs) and NHS England to support and promote the health of looked-after children is also set out in *Statutory Guidance on Promoting the Health and Wellbeing of Looked After Children*:

[Statutory guidance on promoting the health and wellbeing of looked-after children](#)

7.7 For children with special educational needs and disabilities, the home should identify whether the child has an Education, Health and Care (EHC) plan. If the child does, the home should take account of the health objectives it specifies. (For further information on EHC plans see p. 23, para 5.5.)

7.8 The specific responsibilities of the home towards supporting the health of each child should be agreed with the placing authority (the responsible local authority for a looked-after child, otherwise usually the child's parent's/carers) and recorded in the child's placement plan. It is the joint responsibility of the staff of the home and the placing authority that this is agreed at the time of placement.

7.9 Staff must have sufficient understanding of relevant local health provision including the functions of the designated nurse for looked-after children in their area. They should support children to navigate these services, advocating on their behalf where necessary and appropriate.

7.10 Each child must have recorded in their records permission for staff to administer first aid and non-prescription medication from a person with parental responsibility for

them. For looked-after children, this permission must be sought and arranged by the child or young person's social worker. Where appropriate, the child's family should be involved in supporting their health needs as well as in providing permission for treatment.

7.11 Homes have a key role in organising and ensuring each child's attendance at the necessary primary and secondary health services. Most health services that a child needs to access will be provided by other organisations. Therefore, if these services are not accessible, or are withdrawn, staff should engage with those who also hold a responsibility for the child's health to seek to ensure each child's health needs are met.

7.12 When considering whether children placed in the home by a different local authority will be eligible for secondary health care services, the home and the local authority responsible for the child must take into account the NHS England guidance on establishing the responsible commissioner:

[Who Pays? Determining responsibility for payment to providers](#)

Supporting children

7.13 Children's homes should encourage children to take a proactive role in the management of their day to day health and well-being. Where children have specific health needs or conditions, they should be supported to manage these subject to their age and understanding. When a child needs additional health support, children's home staff should work with the child's placing authority to enable proper and immediate access to any specialist medical, psychological or psychiatric support required.

7.14 The registered person must ensure that staff have the relevant skills and knowledge to be able to: respond to the health needs of children; administer basic first aid and minor illness treatment; provide advice and support; and where necessary meet specific individual health needs arising from a disability, chronic condition or other complex needs.

7.15 At least one person on duty at any given time in a children's home must have a suitable first aid qualification (regulation 33(2)(a)). First aid boxes should be provided.

Administration of medicines

7.16 Children who wish to keep and take their own medication should be supported to, if they are able to do so safely. Staff should be mindful that children holding their own prescribed medication must only use it for themselves in accordance with the prescription.

7.17 Care must be taken to ensure prescribed medicines are only administered to the individual for whom they are prescribed. Medicines should be administered in line with an agreed (and medically approved) protocol. Records should be kept of the administration of all medication which includes occasions when prescribed medication is refused. Regulation 24 requires the registered person to ensure that they make suitable arrangements to manage, administer and dispose of any medication. These are fundamentally the same sorts of arrangements as a good parent would make but are subject to additional safeguards. Where the home has questions or concerns about a

child's medication, they should approach an expert health professional such as a GP, community pharmacist or designated nurse for looked-after children.

7.18 The Royal Pharmaceutical Society's *The handling of medicines in social care* provides professional pharmaceutical guidance for social care staff who are involved in handling medicines:

[The handling of medicines in social care](#)

Advice, support and guidance

7.19 The registered person should ensure that, in line with their individual health plans and the ethos of the home, children are offered advice, support and guidance on health and personal care to enhance, inform and supplement that provided by their school through Personal, Social and Health Education (PSHE).

7.20 The home has a key role in supporting children to achieve and maintain healthy lifestyles (see explanation above). The registered person should ensure that children are provided with meals that are nutritious and suitable for each child's needs. Where appropriate, children should be involved in choosing and preparing meals, and opportunities to sit together and eat should be promoted.

Health interventions arranged by the home

7.21 The majority of healthcare interventions that are part of a clinical treatment plan for a child will be delivered by or arranged through the child's doctor, nurse or other healthcare professional. However, in some cases the home or another person may directly arrange a health intervention for a child. The registered person must ensure that such an arrangement meets the requirements in regulations 10(2)(d), (3) and (4) if the health intervention is beyond what a competent lay person could be expected to administer with supervision and guidance from a qualified healthcare professional. The CQC and Ofsted guidance, *Registration of healthcare at children's homes*, provides further information for children's homes that provide specialist healthcare:

[Registration of healthcare at children's homes](#)

7.22 Where a specialist health intervention is arranged for a child, the registered person must ensure that the person delivering the intervention has appropriate skills, experience and qualifications. Where the intervention provided is a regulated activity, the registered person should check that the provider of the service is registered with the CQC.⁹ The relevant regulated activities are also listed in the above CQC and Ofsted guidance. Not all activities that may be regarded as healthcare interventions are regulated activities. For example, counselling services and play therapy are not regulated activities and are not eligible for CQC registration. In these cases, the registered person should ensure that the practitioner is instead registered with their relevant professional body where one exists. Most importantly, the registered person must be confident that the person

⁹ In this context a "regulated activity" is as defined by the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

delivering the intervention will do so in a way that is safe and appropriate for the individual child.

Short break settings

7.23 Regulation 10(2)(b) and (c) do not apply to children receiving short breaks.

7.24 The remainder of the health and well-being standard does apply, but must be applied in a manner that is appropriate to the context of the setting. Staff are responsible for maintaining a child's ongoing health treatment during a short break and for obtaining treatment for the child in an emergency. Children using short break provision may have very complex health needs and staff will need appropriate skills to care for them and understand that safeguards may need to be greater than for other children.

The positive relationships standard

The text of the regulation

11.—(1) The positive relationships standard is that children benefit from, and are supported to develop, relationships based on—

- (a) mutual respect and trust;
- (b) an understanding about acceptable behaviour; and
- (c) positive responses to other children and adults.

(2) The positive relationships standard is met if the registered person ensures that—

- (a) each child is encouraged to build and maintain positive relationships with other children and adults;
- (b) each child benefits from positive, stable relationships with staff that set clear boundaries reflecting the nature of the relationship;
- (c) staff—
 - (i) meet each child’s emotional and behavioural needs, as set out in his or her relevant plans;
 - (ii) support each child to develop socially aware behaviours;
 - (iii) encourage each child to take responsibility for his or her behaviour, in accordance with his or her abilities and age;
 - (iv) support each child to develop and practise skills to—
 - (aa) build and maintain positive relationships with others; and
 - (bb) resolve conflicts positively and without harm to himself or herself or other parties;
 - (v) seek to gain each child’s respect and trust;
 - (vi) understand how children’s previous experiences and present emotions can be communicated through behaviour and have the competence and skills to interpret these and develop positive relationships with children;
 - (vii) are provided with supervision and support to manage and understand their own feelings and responses to the emotions and behaviours presented by children, and to help children to do the same;
 - (viii) de-escalate confrontations or potentially violent behaviour wherever possible to avoid the use of physical restraint;
 - (ix) understand and communicate to children that bullying by or of any person is unacceptable;
 - (x) have the skills to recognise incidents or indications of bullying and how to deal with them; and
- (d) disciplinary and restraint measures are used in accordance with regulation 21 (behaviour management and discipline) and regulation 22 (restraint and deprivation of liberty).

Explanation of terms in the regulation

8.1 The following descriptions explain terms used in the regulation in accordance with s.23(1A) of the 2000 Act.

‘positive, stable relationships’

8.2 Positive, stable relationships are consistent and built on an unconditional positive regard, acknowledging the importance of understanding and responding to the child’s lived experience of care. Positive, stable relationships help the child to feel secure and cared about and for.

'bullying'

8.3 Bullying can be in many forms and this standard's references to bullying cover bullying of any kind or description. Bullying is behaviour by an individual or group, repeated over time, that intentionally hurts another individual or group either physically or emotionally. The rapid development of, and widespread access to, technology has provided a new medium for 'virtual' bullying. Cyber-bullying is a form of bullying that can happen at all times of the day, with a potentially bigger audience, and more accessories as people forward on content at a click.

Guidance

Working in partnership with others

8.4 Children's homes should work closely with the placing authority to understand the child's relationship history. Staff should understand, for each child, the appropriate level of contact with family and friends.

8.5 Homes should work closely with health and education professionals as set out in relevant plans to ensure that outcomes identified, and progress made, in relationship building and achieving socially acceptable behaviours, can be recorded and measured.

8.6 Homes should develop and maintain effective working relationships with local youth justice and police services when children in their care have targets to achieve in reducing offending or social unacceptable behaviour.

Supporting children

8.7 Children's homes' staff must support children to develop and practice skills to build and maintain positive relationships with others (regulation 11(2)(c)(iv)(aa)). 'Others' includes individuals both inside and outside the home such as other children in the home, staff, family members, siblings, previous carers and friends (in line with their relevant plans). The care planning standard provides further detail in respect of contact with parents, relatives and friends.

8.8 Expectations of standards of behaviour should be high for all staff and children in the home. These standards should be clear and unambiguous. Children should be supported to develop understanding and empathy towards each other. Positive behaviour and relationships should be reinforced, praised and encouraged; poor behaviour should be challenged and discussed. The development of safe, stable and secure relationships with adults in the home should be central to the ethos of the home and support the development of secure attachments that, where appropriate, persist over time.

8.9 Where positive relationships exist between children and staff this should be respected and maintained as far as possible when making any decisions to alter staffing arrangements. The registered person should respond to children's views about changes to staff and be aware of the potential impact this may have for the child's stability and emotional well-being.

8.10 Staff should understand factors that affect children's motivation to behave in a socially acceptable way. Staff should encourage an enthusiasm for positive behaviour through the use of strategies in line with the child's relevant plans.

8.11 Staff need to be able to respond to each child as an individual. They should be supported to develop skills they need to manage conflict effectively.

8.12 The capacity and competence of staff to build constructive, warm relationships with children that actively promote positive behaviour, provide the foundation for managing any negative behaviour. Staff should have the skills to respond to each child's individual behaviour. Where necessary they should manage conflict, maintain constructive dialogues and react appropriately if challenged by a child in their care.

8.13 Staff supervision must enable staff to reflect and act upon how their own feelings and behaviour may be affected by the behaviour of the children they care for (see p. 54, Part 4 for further information on staff supervision).

Behaviour management policy and restraint

8.14 Regulation 37 requires each home to prepare and implement a 'behaviour management policy'. This policy should describe the home's approach to promoting positive behaviour and the measures of control, restraint and discipline which may be used in the home. These measures should be seen as part of the overall strategy for behaviour and relationship management in the home. Regulation 21(2) details those disciplinary measures that are prohibited.

8.15 Annex A provides further information on the requirements and principles behind regulation 22 on restraint and deprivation of liberty.

Bullying

8.16 Staff should understand what makes a nurturing relationship and be able to recognise and support children who are involved in exploitative or damaging relationships with others.

8.17 Children's homes must demonstrate an effective approach so those working in the home understand what they must do to prevent bullying of children, by other children or adults. Staff should be able to recognise and address peer abuse, cyber-bullying and bullying in day to day relationships in the home. Registered persons must ensure that procedures for dealing with allegations of bullying are in place and staff have the skills required to intervene to protect children from bullying behaviours and deal with those behaviours effectively. (See regulation 36(3)(a) on the policy for the prevention of bullying.)

Children's homes that are also registered as schools

8.18 Where homes are also registered as schools, the home's policies and procedures around bullying should not unnecessarily duplicate or contradict any requirements of other relevant legislation.

Secure children's homes

8.19 Secure children's homes are subject to the requirements of this standard. However, with regard to regulations 11(2)(a) and 11(2)(c)(iv)(aa), secure children's homes may consider managing certain relationships by limiting the interactions between those children.

The protection of children standard

The text of the regulation

12— (1) The protection of children standard is that children are—

- (a) protected from harm;
- (b) enabled to keep themselves safe,

both inside and outside the home.

(2) The protection of children standard is met if the registered person ensures that—

- (a) staff—
 - (i) assess whether each child is at risk of harm, taking into account information in his or her relevant plans;
 - (ii) make arrangements to reduce the risk of harm to each child taking account of that information;
 - (iii) protect each child effectively from harm;
 - (iv) support each child to understand how he or she can manage his or her own safety;
 - (v) have the skills to identify, be alert to and act upon signs that a child is at risk of harm;
 - (vi) manage relationships between children to protect them from harming each other;
 - (vii) understand their individual responsibilities and roles in relation to protecting children, including what action to take whenever there is a serious concern about a child's welfare;
 - (viii) take effective action whenever there is a serious concern about a child's welfare, responding appropriately and alerting and seeking to involve relevant persons to manage risks and maintain each child's safety;
 - (ix) are familiar with, and act in accordance with, the home's procedure under regulation 36(1) (policies for the protection of children);
- (b) if a child is assessed as being at risk of harm, the home's day-to-day care is arranged and delivered so as to keep the child safe;
- (c) the premises used for the purposes of the home are located so that children are, and can be, effectively safeguarded;
- (d) the premises used for the purposes of the home are designed, furnished and maintained so as to protect each child from avoidable hazards to his or her health;
- (e) the arrangements for the protection of children required by regulation 36 (policies for the protection of children) are in place, and the registered person regularly monitors the effectiveness of those arrangements;
- (f) arrangements are made for children and persons working at the home to have access at all times, and in an appropriate form, to information enabling them to contact—
 - (i) the local authority in whose area the home is situated; or
 - (ii) HMCI,if they have concerns about the safety or welfare of children.

(3) The obligations in this regulation apply both inside and outside the home but are limited in their application outside the home by the extent to which the registered person and staff can affect what takes place there.

Explanation of terms in the regulation

9.1 There are no additional specific explanations given for this standard.

Guidance

Working in partnership with others

9.2 The duties and responsibilities of the local authority with regard to safeguarding children and young people are set out clearly in the statutory guidance, *Working Together to Safeguard Children*:

[Working together to safeguard children](#)

9.3 The specific responsibilities of the child's social worker, acting on behalf of the authority, for safeguarding children and young people who are looked-after are set out in *Children Act 1989: Care planning, placement and case review*:

[Children Act 1989: Care planning, placement and case review](#)

9.4 Registered persons should seek to involve the local authority and other relevant persons whenever there is a serious concern about a child's welfare. They are also required by regulation 42 to notify local authorities, Ofsted and others about serious events (see p. 56, paras 14.11-14.16).

9.5 Staff should continually and actively assess the risks to each child and the arrangements in place to protect them. Where there are safeguarding concerns for a child, their placement plan, agreed between the home and their placing authority, must include details of the steps the home will take to manage any assessed risks on a day to day basis.¹⁰

9.6 Most children will spend significant periods of time away from the home both for education/training and leisure. Staff should seek to protect children from harm and support them to manage their own safety when they are outside the home to the extent that a good parent would. They should have the skills and experience to enable children to stay safe away from the home, identify signs that they may be at risk, and where necessary help the child to manage those risks.

9.7 Children's home staff should take reasonable precautions and make informed professional judgements based on the individual child's needs and developmental-stage about when to allow a child to take a particular risk or follow a particular course of action. Staff should discuss the decision with the child's placing authority where appropriate. If a child makes a choice that would place them or another person at significant risk of harm, staff should assist them to understand the risks and manage their own behaviour to keep themselves safe.

A safeguarding culture and ethos

9.8 Children must be enabled to feel safe and be safe. They need to understand how to protect themselves appropriately, feel protected and be protected from significant harm. Staff should encourage children to express their views about whether they feel

¹⁰ For looked-after children see Schedule 2, Care Planning, Placement and Case Review (England) Regulations 2010.

safe, and if not why, both within and outside the home. Staff should support children to understand how to ask for help to stay safe and that the home is an environment which supports this.

9.9 All staff should strive to build positive relationships with children in the home and develop a culture of openness and trust that encourages them to be able to tell someone if they have concerns or worries. Homes should encourage children to feel they can speak to independent visitors, advocates, Independent Reviewing Officers (IROs), Ofsted inspectors or other professionals if they have concerns, and ensure that children know how to contact the local authority.

9.10 Staff need the skills to recognise and be alert for any signs that might indicate a child is in any way at risk of harm.

9.11 Children must be encouraged to develop positive relationships with others both in and outside the home as set out in the positive relationships standard. However, staff should be alert to the possibility that children may be at risk from such relationships including with other children in the home, staff, family members, friends and others outside the home, and should take appropriate steps to protect a child where they have concerns.

9.12 Where children are listened to, respected and involved in the development of the home's ethos and culture and in decisions about the way the home is run on a day to day basis, the conditions that might lead to an individual in the home abusing their position are less likely to arise. Effective staff supervision is critical.

9.13 Children must be supported by staff to understand what abuse is and what constitutes inappropriate behaviour. They should be given information about how to report concerns and about help lines such as ChildLine.¹¹ They should be able to make private telephone calls and contact relevant websites to seek advice and help.

Allegations of abuse

9.14 Any allegation of harm or abuse must be addressed in line with the home's child protection policy (see below).

9.15 Children must be listened to and enabled to report any allegations at the earliest opportunity. Staff should report any allegation of abuse immediately to a senior manager within the home.

9.16 County and unitary local authorities should have a Local Authority Designated Officer (LADO) who will get involved in the management and oversight of individual cases where there is an allegation of abuse. The LADO should be informed within one working day of all allegations that come to an employer's attention or that are made directly to the police. For further information see *Working Together to Safeguard Children*:

[Working together to safeguard children](#)

¹¹ 0800 1111: [Childline website](#)

Policies for the protection of children

9.17 In addition to the requirements of this standard, the registered person has specific responsibilities under regulation 36 to prepare and implement policies setting out: arrangements for the protection of children from abuse or neglect; clear processes for referring child protection concerns to the local authority where the home is situated; arrangements for dealing with allegations involving staff in the home; and explicit procedures to prevent children going missing and take action if they do. The policies on safeguarding children from abuse and neglect should include arrangements in relation to e-safety. All policies should be reviewed regularly and revised where appropriate.

9.18 The policies must be available and explained to children and their families as well as to all staff, whatever their role. The registered person must make sure that all staff are familiar with these policies and understand how to put them into practice.

Children missing from the children's home

9.19 Local authorities should have in place *Runaway and Missing from Home and Care* (RMFHC) protocols agreed with local police and other partners. Where appropriate, they should also have agreed protocols with neighbouring authorities or administrations. The protocols should be agreed and reviewed regularly with all agencies and be scrutinised by the Local Safeguarding Children's Board (LSCB).

9.20 Where there is a possibility that a child will run away and go missing from a children's home placement, their placement plan should include a strategy to minimise this risk. If the child is looked-after, their care plan (arranged by their local authority) must include such a strategy.

9.21 *Statutory guidance on children who run away or go missing from home or care* sets out the steps local authorities and their partners should take to prevent children from going missing and to protect them when they do go missing. Children's homes should have regard to the relevant aspects of this guidance:

[Statutory guidance on children who run away or go missing from home or care](#)

9.22 If there is a risk that a child may run away or go missing staff, should do their best to help them understand the risks and dangers involved and make them aware of how to seek help.

9.23 The registered person must specify the procedures to be followed and the roles and responsibilities of staff when a child is absent; for example, whether there is an expectation that staff attempt to locate the missing child and how staff should support the child on return to the home.

9.24 The home's procedures must take into account the views of appropriate local services and comply with police and local authority protocols for responding to missing person's incidents in the area where the home is located.

9.25 When staff consider that a child is at risk of significant harm if they leave the home, they should seek to negotiate with the child so that they understand why staff do

not want them to leave. This may include if they consider the child is at risk of significant harm from sexual exploitation. (See Annex A for information on the exceptional circumstances where use of restraint may be appropriate.)

9.26 Where a child returns to the home, the responsible local authority must provide an opportunity for the child to have an independent return home interview. Homes should take account of information provided by such interviews when assessing risks and putting arrangements in place to protect each child.

9.27 Records must be kept by the home detailing all individual incidents when children go missing from the home. This information should be shared with the placing authority and, where appropriate, with the child's parents.

9.28 Where a child runs away persistently or engages in other risky behaviours, such as frequently being absent from the home to associate with inappropriate adults, the registered person, in consultation with the child's placing authority, should convene a risk management meeting to develop a strategy for managing risks to the young person. The strategy should be agreed with the child's placing authority, the local authority where the home is located and the local police.

Children's homes that are also registered as schools

9.29 Children's homes that are also schools will be subject to safeguarding duties set out elsewhere in statute and guidance. For further information see *Keeping children safe in education*:

[Keeping children safe in education](#)

9.30 The home's policies and procedures around child protection should reflect any requirements of other relevant legislation.

Secure children's homes

9.31 Secure children's homes should have policies and procedures that effectively identify and counter risks of self-harm and suicide. A child at risk of self-harm may exceptionally wear special clothing but only for as long as is necessary to protect them and this must be subject to a specific risk assessment and regular review. Any special clothing must preserve the child's privacy and dignity.

9.32 Children living in secure homes will not typically spend time away from the home for education/training as set out in paragraph 9.6. They may be given permission to leave the home with staff for a specific event or to prepare for their release from secure care. They may be required to leave the home to attend court. Time away from the home may present particular risks in terms of the child attempting to run away to meet with family or others that they have been prevented from having contact with. Staff need to have the skills to manage these risks and protect the children in their care.

9.33 Staff need the skills to effectively prepare the child for their release from secure care by building their resilience and ability to keep themselves safe.

The leadership and management standard

The text of the regulation

13— (1) The leadership and management standard is that the registered person enables, inspires and leads a culture that—

- (a) helps children aspire to do their best; and
- (b) promotes their welfare.

(2) The leadership and management standard is met if the registered person—

- (a) leads and manages the home in a way that delivers the approach, ethos and outcomes set out in the home's statement of purpose;
- (b) demonstrates a vision for the home;
- (c) leads staff to work as a cohesive team and ensures that they have the experience, qualifications and skills to meet the needs of each child in the home;
- (d) ensures that each child receives care from a stable and sufficient workforce that is well supported and provides a consistent approach to care;
- (e) knows and understands the impact that the home is having on the progress and experiences of each child and uses this knowledge and understanding to inform the development of the quality of care in the home;
- (f) can demonstrate that practice in the home is informed and improved by—
 - (i) knowledge of developments in relation to the care of children within the range of needs for which it is intended that the home is to provide care; and
 - (ii) feedback on the experiences of children, including complaints received;
- (g) uses monitoring and review systems to—
 - (i) achieve continuous improvement in;
 - (ii) identify and address any weaknesses in or demands upon, the quality of care provided by the home.

Explanation of terms in the regulation

10.1 The following descriptions explain terms used in the regulation in accordance with s.23(1A) of the 2000 Act.

'stable and sufficient workforce'

10.2 A stable and sufficient workforce is one that has, at all times, enough suitably trained staff on duty to meet the assessed needs of all children in the home, and is able to respond to emergency placements, where accepted. The registered person must demonstrate every effort to achieve continuity of staffing so that children's attachments are not overly disrupted, including ensuring that the employment of any temporary staff will not prevent children from receiving the continuity of care that they need (regulation 33(1)).

Guidance

Responsibilities for leadership and management

10.3 As with all the Quality Standards, the responsibilities in this standard fall on the registered person and that is where accountability ultimately sits. In practice, just as with the other standards, those responsible for the day to day running of homes, including leadership teams in large homes and specialist advisers within the various settings (for example, security advisers in secure homes) play a key role in enabling the registered person to fulfil the requirements of this standard.

Working in partnership with others

10.4 Registered persons have a key role in seeking to develop the home's effective working relationships with each child's placing authority and with other services, individuals, agencies, organisations and establishments that work with children in the local community, e.g. police, schools, health, youth offending teams (see regulation 5).

Supporting children

10.5 The registered person is responsible for leading high quality care for all children living in the home. They must lead and manage the home in a way that delivers the ethos, outcomes and approach set out in the home's Statement of Purpose (SoP), and should also help to shape these. They should develop a culture of aspiration for children which is demonstrated through the resources and opportunities that are offered to them.

10.6 The registered person should support staff to be ambitious for every child in the home and to gain skills and experience that enable them to actively support each child to achieve their potential. To ensure that staff understand and can meet each child's needs, in line with their responsibilities, the registered person will need to understand the needs of the children in their care.

10.7 The registered person should seek to establish a diverse staff team with a range of interests. They should lead staff to share those interests with children and so enrich their experiences of living in the home.

Workforce

10.8 Those in a leadership and/or management role should be visible and accessible to staff and aware of their leadership and/or management responsibilities.

10.9 The registered person should have a workforce strategy that records the training and continuing professional development needs and achievements of those employed in the home – including the home's manager. Such a strategy should include timescales for achieving induction, mandatory qualifications and training plus commitments to continuing professional development and the procedures for supervision (see regulations 34 and 35). They should ensure that staff can access appropriate facilities and resources to support this.

10.10 The registered person should plan staffing levels to ensure that they meet the needs of children and can respond flexibly to unexpected events or opportunities.

Staffing structures should promote continuity of care from the child's perspective. If children give their views that the staffing structure does not work to promote the best care for them, appropriate action should be taken.

10.11 No more than half the staff on duty at any one time, by day or night, at the home should be from an external agency and no member of staff from an external agency should be alone on duty at night in the home. Contingency plans should be prepared in the event of a shortfall in staffing levels. If it is likely that there might only be one member of staff on duty at any time the manager should make a formal assessment of the implications for children's care, including any likely risks to children, staff or members of the public. This assessment should be recorded and available for inspection by Ofsted and placing authorities.

10.12 The use of agency or bank staff should be carefully monitored and reviewed. Rapid turnover of staff, whether agency or directly employed, is likely to indicate underlying problems and should be monitored and addressed by the registered person.

10.13 The registered person is responsible for ensuring that all staff consistently follow the home's policies and procedures for the benefit of the children in the home's care. Everyone working at the home should understand their roles and responsibilities and what they are authorised to decide upon on their own initiative. There should be clear lines of accountability. Each home must have clear arrangements in place to maintain effective management when the manager is absent, off duty or on leave.

10.14 Any staff member placed in charge of the home and other staff in supervisory roles such as shift leaders should have substantial relevant experience of working in the home and have successfully completed their induction and probationary periods.

10.15 Whenever possible, the staff group in day to day contact with children should include staff of both genders. Where the home's SoP makes it explicit that the home uses staff of one gender only, clear guidance will need to be in place and followed as to how children are enabled to maintain relationships with members of the opposite gender to the staff group. Staffing arrangements should also take into consideration children's ethnic and cultural backgrounds and any disabilities they have.

Monitoring and review

10.16 The registered person should oversee the welfare of the children in their care through observation and engagement with: each child; the home's staff; each child's family/carers where appropriate; and professionals involved in the care or protection of each child including their social worker, Independent Reviewing Officer (IRO), teachers, clinicians etc.

10.17 They must ensure that the home's care practices take account of relevant wider developments in the care of children, making use of sources such as academic research, other evidence-based data or information, policy developments, information on practice development, and other sources of good practice.

10.18 The registered person should actively seek independent scrutiny and make best use of information from independent and internal monitoring (including under regulations 45 and 46) to ensure continuous improvement. They need to be skilled in anticipating difficulties, learning from disruptions and placement breakdowns. They are responsible for proactively implementing lessons learned.

The care planning standard

The text of the regulation

14— (1) The care planning standard is that children’s needs are met by the home providing well-planned care and effectively managing the admission and placement of children.

(2) The care planning standard is met if—

- (a) the registered person ensures that the needs of children admitted are within the range of needs set out in the home’s statement of purpose;
- (b) the registered person ensures that arrangements are in place to—
 - (i) ensure the effective induction of children into the home;
 - (ii) manage and review the placement of children in the home to ensure that the welfare of each child is protected;
 - (iii) plan for, and to support, each child when he or she prepares to leave the home in a way that is consistent with arrangements agreed with his or her placing authority;
- (c) subject to regulation 23 (contact and access to communications), the registered person promotes contact between each child and his or her parents, relatives and friends, in accordance with the child’s relevant plans;
- (d) the premises used for the purposes of the home are located so that children are able to access services to meet the needs identified in their relevant plans;
- (e) the registered person contacts a child’s placing authority and requests a review of that child’s relevant plans when—
 - (i) the registered person considers that the child is at risk of harm or has concerns that the care provided for the child is inadequate to meet his or her needs;
 - (ii) the child requests a review of his or her relevant plans;
- (f) each child is supported to access and contribute to the records kept by the registered person in relation to him or her.

Explanation of terms in the regulation

11.1 The following descriptions explain terms used in the regulation in accordance with s.23(1A) of the 2000 Act.

‘relevant plans’

11.2 The references to ‘relevant plans’ will include a looked-after child’s ‘pathway plan’ if they have one. When a looked-after child reaches the age of 16 and becomes an eligible child, for the purposes of entitlement to support as a care leaver, their care plan becomes their pathway plan which must address how they will be supported to ensure they are enabled to make a successful transition to adulthood.

Guidance

Working in partnership with others

11.3 Effective care planning and strong working relationships between the staff of the home and the placing authority (i.e. the local authority for a looked-after child and otherwise usually the child's parents/carers) are essential to the success of placements.

11.4 For looked-after children, many of these planning duties fall to the local authority. The registered person should ensure that they and staff engage proactively with the local authority to shape and contribute fully to the various plans for the child's care on an ongoing basis.

11.5 The registered person should only accept placements for children where they are satisfied that the home can respond effectively to the child's assessed needs, as recorded in the child's relevant plans. The Statement of Purpose (SoP) should specify the needs the home is equipped to meet.

11.6 The registered person should challenge a local authority if they are approached to accept the placement of a child in the absence of a comprehensive and up to date plan. It is essential that homes understand what will be required of them before they accept responsibility for a child's placement, to avoid disruption and instability for the child in future and for other children in the home. For non-looked-after children, the home should ensure they have sufficient information from the child's placing authority (usually their parents/carers) and other relevant agencies to effectively assess whether they can meet the child's needs before agreeing to the placement.

11.7 Homes able to accept unplanned emergency placements will require sufficient suitably skilled and trained staff. Information about the home's capability in this area should be included in the SoP.

11.8 Registered persons should ensure there are procedures in place for introducing children to the home, whether admitted in a planned way or in an emergency. The home's induction arrangements should be described in the SoP.

11.9 As well as longer-term support for children to transition from the home effectively (regulation 6(2)(c)(v)), the home has an important role in supporting each child in leaving the home smoothly in the period immediately before their departure. The registered person should seek to work with the placing authority to ensure that each child's transition is planned and help each child to prepare for leaving both practically and emotionally.

Changes to care, and review

11.10 Significant changes to a looked-after child's care, such as a change of placement, should only take place following a statutory review of their care plan chaired by their Independent Reviewing Officer (IRO). The child should be actively involved in these important meetings and supported to express their views, wishes and feelings.

11.11 Where the registered person considers that a child is at risk of harm or is persistently missing from their placement, they must contact the local authority to request a review of the child's care plan (regulation 36(5)). Local authorities must give serious consideration to such requests.¹²

11.12 If, in an exceptional circumstance related to the safeguarding of a child, the registered person has to move a child out of the home to other accommodation, the placing authority should be contacted immediately. In these circumstances, if the child is looked-after, a statutory review should be convened as soon as possible.

11.13 For looked-after children, the registered person should seek to ensure that the local authority consults regularly with them and the child about the child's relevant plans. If the child raises concerns about the content of any of their plans, their implementation or the process of review, staff should advocate for the child and seek to ensure that their concerns are addressed.

Contact

11.14 It will be in the interests of the majority of looked-after children to maintain contact with their families and friends. Information about the local authority's responsibilities for enabling continued family contact is in *Children Act 1989: Care planning, placement and case review*:

[Children Act 1989: Care planning, placement and case review](#)

11.15 Contact details must be included in the placement plan agreed between the registered person and the child's placing authority.

11.16 There may be circumstances where children's homes staff assess that restriction of contact is necessary in the interests of the child, to safeguard them or promote their welfare. It will sometimes be necessary for staff to make a decision about this at very short notice. Any variation in contact on the initiative of children's homes staff should be recorded and the child's placing authority informed on the next working day. (For further information see regulation 23 on contact and access to communications.)

11.17 Children's homes have a duty to provide access to a telephone that children can use privately (regulation 23(4)(a)). This can include the provision of a mobile phone so long as there are arrangements in place for the child to be able to make telephone calls in private if their personal mobile phone is lost, out of credit or broken.

Records

11.18 Children should be encouraged to see the home's files as 'living documents' and should be supported to view the record kept about them on a regular basis. (See pp. 54 - 56, paras 14.1 - 14.10 for further information on record keeping.)

¹² Regulation 33, Care Planning, Placement and Case Review (England) Regulations 2010.

Secure children's homes

11.19 Regulation 14(2)(d) must be applied to secure children's homes in a way that is proportionate and appropriate given the needs of the individual child. A secure children's home may be located in an area that does not enable each child to access all the services identified in their relevant plans. In addition, a child is not at liberty to leave a secure children's home to access services. The home must still seek to ensure that each child is able to access services that are essential to meet their needs, taking account of the period of time that the child is accommodated in the home and that they are being accommodated in a secure environment.

Short break settings

11.20 Regulation 14(2)(c) does not apply to short break settings. These homes must enable a child to have contact with their parents/carers if they request this and it is in line with their relevant plans. Short break settings do not have a longer term role in promoting contact because each child only stays at the home for short periods of time.

Management and administrative regulations

Guidance on Part 3 of the regulations – Registered persons

Appointment and fitness of registered persons

12.1 Regulations 27-29 set out the fitness requirements for the registered provider, manager and responsible individual (RI). See the glossary (p. 58) for information on their different roles. If the registered provider is an organisation, its directors must also satisfy fitness requirements (regulation 27(2)(c)(i) and 27(3)). This is to ensure that children's welfare is protected because directors' decisions and actions could have a significant impact on an individual home.

12.2 Every home must have someone who is in day to day charge of the management of the home. That person will either be:

- the registered provider if they are an individual, a fit person to manage a children's home and in full-time day to day charge of the home; or
- an individual that the registered provider appoints as manager (regulation 28).

12.3 Regulation 29(3) requires that a manager must have the capacity to be in full-time day to day charge of each children's home that they manage. If an individual is manager for more than one home, the registered person must ensure that the individual has the skills and experience to manage all of the homes effectively. There need to be appropriate delegation structures and staff being delegated to need to have sufficient skills, experience and capacity to take on managerial and leadership roles. When a new person (who is not the registered provider) is appointed as manager for a home, the registered provider should support them to become registered with Ofsted without delay.

12.4 If the registered provider is an organisation, they must appoint an individual as the responsible individual (RI) for the home. The RI's role is to supervise the management of the home as described in the definition of a RI in regulation 2. They should be able to demonstrate to Ofsted an understanding of both effective practice in responding to the needs of looked-after children and of local authority care planning duties and how children's homes are required to support these. Ofsted can at any time scrutinise the fitness of a RI, either through inspection or as a stand-alone event. Ofsted's approach will depend on the circumstances.

12.5 Regulation 27(5) requires that an individual appointed as RI has the capacity, skills and experience to supervise the management of each children's home that they are RI for. If an individual is RI for more than one home, the registered person must ensure that they have the capacity, skills and experience to supervise the management of all of the homes that they are RI for. This includes being able to demonstrate that they have the essential skills needed to develop the leadership and management of homes within their remit, so homes meet the Quality Standards and enable children living in them to

thrive and reach their potential. There is no limit to the number of homes that a person can be appointed as RI for, but they must be able to demonstrate that they can effectively supervise the management of each home individually, as well as all of the homes overall.

12.6 When the person who is in day to day charge of the home proposes to be absent from the home for a continuous period of 28 days or more, they must notify Ofsted in writing (regulation 48). The registered person must also notify Ofsted of a range of other changes to the running of the home (regulations 49 and 51).

Guidance on Part 4 of the regulations – Staffing

Employment and supervision of staff

13.1 As set out in regulations 33-35, the registered person is responsible for maintaining good employment practice. They must ensure that recruitment, supervision and performance management of staff supports safe practice and minimises potential risks to children. The experience required of staff will be set out by the registered person and could include length of experience and/or experience relevant to the job.

13.2 The registered person must have systems in place so that all home staff are supervised and supported to provide each child with the high quality care that they need. Professionally qualified staff employed by the home, e.g. teachers or social workers, should be provided with supervision from a similarly qualified and experienced professional. It is good practice for managers of children's homes to seek supervision for themselves from a similarly qualified and experienced professional.

13.3 Staff in a supervisory role should ensure the staff they manage or supervise understand how to gain the information, advice and skills needed to provide a comprehensive, personalised, service to children and in particular, to any child for whom they are a 'keyworker'. This may include access to legal advice.

13.4 All staff should have their performance individually and formally appraised at least annually. This appraisal should take into account the views of children in the home's care and of other professionals who have worked with them over the year.

Guidance on Part 5 of the regulations – Policies, records, complaints and notifications

Keeping records electronically

14.1 Records may be kept electronically provided that this information can be easily accessed by anyone with a legitimate need to know and, if required, be reproduced in a legible form. Electronic records should be held at the individual home and must retain appropriate confidentiality.

Keeping records on children in the home

14.2 Regulations 36-41 set out the record keeping requirements in children's homes. All children's case records (regulation 38) must be kept up to date and stored securely whilst they remain in the home. Records must be kept in a permanent form, signed and dated by the author. Children's case records must be kept for 75 years from the date of birth of the child, or if the child died before age 18, for 15 years from the date of his or her death.

14.3 Staff should be familiar with the home's policies on record keeping and understand the importance of careful, objective, and clear recording. Staff should record information on individual children in a non-stigmatising way that distinguishes between fact, opinion and third-party information. Information about the child must always be recorded in a way that will be helpful to the child.

14.4 The home's records on each child represent a significant contribution to their life history. Children and their parents should be supported to understand the nature of records kept by the home and how to access them. Staff should understand their important role in encouraging the child to reflect on and understand their history, according to their age and understanding. They might encourage children to keep appropriate memorabilia of their time in placement and help them record significant life events.

Keeping of other records

14.5 The registered person is responsible for keeping of other records as set out in regulations 36, 37, 39-41.

14.6 In addition to the specified records that should be kept on staff, it is good practice for records to be kept of supervision sessions with staff and to ensure that both the supervisor and staff member have a copy of the record.

Access to records and sharing requirements

14.7 Children should be actively encouraged to read their files and to correct errors and add personal statements. They should be regularly reminded of their rights to see information kept about them and be given information about how they might be supported to access their files in later life.

14.8 Staff must also be familiar with information sharing requirements relating to looked-after and other children. They should be able to access and have access to the information sharing policy and procedures specified by the Local Safeguarding Children's Board (LSCB) for the area where the home is located.

14.9 Children's records must not be disclosed to anyone except those individuals authorised to have access, or under a court order.

14.10 If a home closes or is taken over by a different registered provider, it is important that children's case records continue to be stored securely for the required period of time (regulation 38) so that children can access their records in later life. If a different registered provider takes over the home, the records must be kept in the home for as long as the child is accommodated there and then retained in a place of security (regulation 38(3)). If the home closes but the registered provider continues to run other children's homes, they are responsible for keeping the records in accordance with regulation 38(4). In cases where the home and its registered provider cease to operate entirely, the records must be passed to the child's placing authority.

Notification of serious events

14.11 Regulation 42 requires the registered person to notify a specified list of people in the event of the death of a child or if there is a referral of an individual working in the home pursuant to section 35 of the Safeguarding Vulnerable Groups Act 2006. In addition, the registered person should notify other relevant persons (or ensure that they are notified) – this may include other professionals, services, organisations, agencies or establishments who have been involved in the child's care. It is for the registered person to judge who else it is appropriate to notify depending on the individual circumstances.

14.12 For all other serious events, it is for the home to judge whether the event is sufficiently serious to make formal notifications and, if it is, who they should notify. Examples of incidents that are likely to be considered a serious event affecting the welfare of a child include: a child going missing; sexual exploitation; a serious assault; a serious illness or accident; an allegation that a child has committed a serious offence; a serious incident where the police have been called to the home; a serious incident of self-harm; or a child protection referral to the local authority. This is not an exhaustive list and homes must assess each case individually.

14.13 Where the home judges that the event is sufficiently serious for formal notifications, the relevant persons who should be notified are likely to include Ofsted and the placing authority. They may also include the police, probation service, health professionals and others involved with the care or protection of the child and the local authority for the area the home is located in (if this is not the child's placing authority). Homes should consider the frequency of events and judge whether their cumulative effect makes notification appropriate even if in isolation each event would not warrant this.

14.14 The registered person must have a system in place so that all serious events are notified, within 24 hours, to the appropriate people. The system must cover the action that should be followed if the event arises at the weekend or on a public holiday. Notification must include details of the action taken by the home's staff in response to the event.

14.15 The home's record of the event must include a description of the action taken and the outcome of any resulting investigation. Following a notifiable event under regulation 42, the home should contact the placing authority to discuss the need for further action.

14.16 The registered person should also have a system for notification to responsible authorities of any serious concerns about the emotional or mental health of a child such that a mental health assessment would be requested under the Mental Health Act 1983.

Guidance on Part 6 of the regulations – Management of the home

Reviews of premises and quality of care

15.1 When establishing the home, the registered person must ensure that it is suitably located, so that children are effectively safeguarded and can access services to meet needs identified in their relevant plans (see regulations 12(2)(c) and 14(2)(d)). As set out in regulation 44, the registered person should review the appropriateness and suitability of the location and premises of the home at least once a year. The review should include the identification of any risks and opportunities presented by the home's location and strategies for managing these. Providers should refer to the non-statutory guidance about the location assessment process:

[Children's homes regulation amendments 2014: Advice for children's homes providers on new duties under regulations that came in to effect in January and April 2014](#)

15.2 Regulation 46 sets out requirements for the registered person to have a system in place which allows them to monitor the matters set out in regulation 46(2) at least once every six months. The registered person should undertake a qualitative review that focuses on the quality of the care provided by the home, the experience of children and what impact their care is having on children's outcomes, and the improvements they will make. Reviews should be underpinned by the Quality Standards as described in regulations 5 to 14. The registered person is responsible for deciding what each review should focus on based on the specific circumstances of the home at that particular time. There is no expectation that the registered person will review the home against every part of the Quality Standards every six months – they should use their professional judgement to decide which factors to focus on. The review should enable the registered person to develop strengths and address weaknesses in the home's care. It should be used as a tool for continuous improvement in the home.

15.3 The registered person must supply to Ofsted a copy of reports produced from monitoring within 28 days of completion and make copies available to placing authorities (other than parents).

Glossary

2000 Act	Care Standards Act 2000
“Child” and “Children”	Any references to the term ‘child’ or ‘children’ in the regulations and guide include any person who is accommodated in a children’s home and is not employed in the home or in relation to it. This will include, for example, a young person who was placed at the home as a looked-after child, and has continued to remain at the home after their 18th birthday while they are completing their studies at school. Children’s homes may accommodate adults provided that the home remains ‘wholly or mainly for children’ as required by section 1 of the 2000 Act.
Registered Provider	<p>A person who is registered under Part 2 of the 2000 Act as the person carrying on the children’s home.</p> <p>The registered provider can be an individual, a partnership or an organisation. If they are an organisation, they must appoint a responsible individual and registered manager. If they are a partnership, they must appoint a registered manager.</p>
Responsible Individual (RI)	If the registered provider is an organisation, they must appoint a responsible individual (RI). The RI must be a director, manager, secretary or other officer of the organisation. The role of the RI is to supervise the management of the home.
Registered Manager	<p>If the registered provider is an organisation or partnership, they must appoint a registered manager. If the registered provider is an individual, they may manage the home if they meet the requirements in Part 3 of the regulations.</p> <p>The role of the manager is to be in full-time day to day charge of the home.</p> <p>The registered manager is normally different from the RI (where one is appointed) because one manages the home and the other supervises the management.</p>
Registered Person	<p>Any person who is the registered provider or registered manager of a home.</p> <p>If a home has both a registered provider and a registered manager, anything required under the regulations to be done by the “registered person”, if done by one of the registered persons, is not required to be done by any of the other registered persons (regulation 32).</p>

ANNEX A – Behaviour management in children’s homes

Regulation 37 requires each home to prepare and implement a ‘behaviour management policy’. This policy should describe the home’s approach to promoting positive behaviour and the measures of control, restraint and discipline which may be used in the home. These measures should be seen as part of the overall strategy for behaviour and relationship management in the home and the home should consider its approach to physical intervention as part of this.

The end of this annex includes principles that the registered person should take into account in developing their home’s approach to behaviour management, including in relation to physical intervention and restraint.

The behaviour management policy should inform how staff are deployed. Regulations 13(2)(c) and (d) require children’s homes to employ a sufficient number of suitably qualified, competent and experienced persons. Where staff identify concerns about children’s behaviour, the registered person should ensure that there are an adequate number of suitably skilled staff on duty to be able to respond effectively to the children concerned.

Regulation 21(2) details those sanctions that are prohibited. Sanctions for poor behaviour should not be punitive but should be restorative in nature, so that children are helped to recognise the impact of their behaviour on other children, the staff caring for them and the wider community. In some cases it will be important for children to make restitution in some form to anyone hurt by their behaviour.

The behaviour management policy must be understood and applied at all times by staff, kept under review and revised where appropriate.

Homes should agree with their local police force procedures and guidance on police involvement with the home to reduce unnecessary police involvement in managing behaviour and criminalisation of behaviours. Children should not be charged with offences resulting from behaviour that would not lead to police involvement if it occurred in a family home.

Physical intervention and use of restraint

“Physical intervention” in this guide refers to methods of controlling children that do not involve any use of force to hold a child. For example, a carer may need to offer a “guiding hand” to lead a child away from a harmful situation, or block a child’s way to prevent them from putting themselves in danger.

The behaviour management policy should describe how the home’s ethos and approach to supporting children to develop positive, socially aware behaviour informs the home’s

approach to physical intervention and also how the support provided to children will minimise the likelihood of the use of restraint.

Children's homes' approaches to restraint must be informed by a physiological and psychological understanding of children that recognises that: children are continuing to develop; and there will be wide differences in their circumstances, and in how they understand and interpret how they are expected to behave.

Regulation 22 defines restraint and sets out the only purposes for which it can be used:

22.— (1) Subject to paragraph (2), a measure of restraint may only be used on a child accommodated in a children's home for the purpose of—

- (a) preventing injury to any person (including the child who is being restrained);
- (b) preventing serious damage to the property of any person (including the child who is being restrained); and
- (c) in the case of a child who is the subject of a court order as set out in sub-paragraph (4), or who is accommodated in a secure children's home, preventing the child from absconding from the home,

and then only where no alternative method of preventing an event in sub-paragraphs (a) to (c) is available.

(2) Where a measure of restraint is used on a child accommodated in a children's home—

- (a) the measure of restraint must be proportionate; and
- (b) no more force than is necessary should be used.

(3) A measure of restraint is used where a person—

- (a) uses, or threatens to use, force to secure the doing of an act which a child resists; or
- (b) restricts a child's liberty of movement, whether or not the child resists.

(4) Nothing in these regulations prevents a child from being deprived of their liberty where that deprivation is authorised in accordance with a court order, other than a court order made under section 25 of the 1989 Act.

Restraint cannot be employed as a disciplinary measure, for reasons of 'good order and discipline', to enforce compliance with a home's routines or rules. Injury could, in certain circumstances, include psychological injury.

In every case, the measure of restraint must be proportionate and no more force than necessary should be used. This is the minimum amount of force necessary to avert injury or serious damage to property applied for the shortest possible time. Any technique for restraining a child should never be intended to inflict pain.

Children's homes have a responsibility to protect children in their care. There may be circumstances when it is permissible to restrain a child if there is reasonable cause for believing this is the only way it is possible to prevent the child from being injured. For example, to prevent a child from leaving the home to take drugs or put themselves at risk of sexual exploitation, or to prevent a child, who is the subject of a court order authorising a deprivation of liberty, from absconding into a risky environment. Children's homes staff

must be able to use their professional judgement in these very difficult situations, which are likely to demand split-second decision making.

Any action to restrain a child in these circumstances should be based on a careful risk assessment centred on an understanding of the needs of the child (as set out in their relevant plans) and evidence about the risks the child faces.

Any use of restraint carries risks. These include causing serious physical injury, psychological trauma or emotional disturbance. When considering whether restraint on a child is warranted, staff in children's homes need to take into account:

- the age and understanding of the child;
- the size of the child;
- the relevance of any disability, health problem or medication to the behaviour in question and the action that might be taken as a result;
- the relative risks of not intervening;
- the child's previously sought views on strategies that they considered might de-escalate or calm a situation;
- the method of restraint which would be appropriate in the specific circumstances; and
- the impact of the restraint on the carer's future relationship with the child.

Staff need to demonstrate that they fully understand the risks associated with any restraint technique deployed in the home. For example any techniques that may interfere with breathing are likely to present an unacceptable risk and should never be used. Holding a child by the neck carries a risk of suffocation or restricting blood flow to the brain, as well as a risk of spinal injury, and so on no account should neck holds be used as a way of restraining children. The so called "nose distraction" technique will inflict pain and so cannot be proportionate and should never be used on children in children's homes.

In some cases, behaviour necessitating the use of physical restraint may be due to a child's impairment or disability. If children have a disability or special educational need, it is essential that staff identify and utilise existing behaviour management plans or techniques developed by the child's school, family or by child psychology or other services.

The registered person is responsible for ensuring that all their staff have been thoroughly trained in the use of restraint techniques that are appropriate to the needs of the children in the home's care, as defined by the home's Statement of Purpose. It must not be assumed that a technique designed for use with adults can be safely applied to children. Those commissioning training in restraint for children's homes staff must be satisfied that the ethical values informing any system of restraint are appropriate to the needs of the

children in the home's care. They must also see evidence that the system has been medically assessed to demonstrate its safety for use in a context caring for children who are still developing, physically and emotionally. The registered person must routinely review the effectiveness of any restraint system commissioned. In particular, they should check the medical assessment of the system remains up to date.

Any child who has been restrained should be given the opportunity to be debriefed and talk through their experience by a responsible adult who was not involved in the restraint incident within 24 hours. Children should be encouraged to add their views and comments to the record of restraint. Children must be offered the opportunity to have access to an advocate to help them with this (see regulation 7(2)(d)(ii)).

The purpose of record keeping is so the registered person and staff can review behaviour and respond promptly where any worrying issues or trends emerge. The review should provide the opportunity for amending behaviour management practice to ensure this offers an effective response that is sensitive to the needs of all the children in the home's care.

Deprivation of liberty

Restraint includes actions to restrict a child's liberty or freedom of movement, whether or not that child resists. Indeed some children will not offer any objection and may even agree to their movement being restricted in this way.

However, such actions may in certain circumstances amount to a "deprivation of liberty." A deprivation of liberty may occur where a child is both under continual supervision and is not free to leave the home. Modifications to the home's environment could also mean that residents are deprived of their liberty.

In the case of young people aged 16+ who lack capacity, a deprivation of liberty may be authorised by the Court of Protection following an application under the Mental Capacity Act 2005.

There may be circumstances where the plan for a child under the age of 16 involves their having to be cared for under circumstances in which a court order would also need to be obtained to authorise a deprivation of liberty.

Principles for assessing the quality of behaviour management in children's homes

- Children must be treated with understanding, dignity, kindness and respect.
- Positive relationships between the children and the adults caring for them must be protected and preserved.

- Understanding children’s behaviour allows their unique needs, aspirations, experiences and strengths to be recognised and their quality of life to be enhanced.
- Involvement and participation of children, their families, local authorities and advocates is essential, wherever practicable.
- Children’s homes must support young people to balance safety from injury (harm) and making appropriate choices.
- Children’s homes and local authorities/commissioners must ensure that all incidents of restraint are subjected to systems of regular anxious scrutiny to ensure that the use of restraint is fair and the above principles are respected.
- Compliance with the relevant rights in the EU Convention on Human Rights at all times.

Principle	Definition	Practical application
Participation	Enabling participation of all children, parents, local authorities and carers.	Consulting with children staff and other stakeholders; involving children, carers and support staff in developing risk assessments and behaviour support plans.
Accountability and Review	Ensuring clear accountability, identifying who has legal duties and practical responsibility for a human rights based approach.	Clearly outlining responsibilities under the Children’s Act regulations and these regulations; ensuring staff are aware of their obligations to respect human rights and are measuring outcomes against quality standards. Establishing systems of review – at home level and on an individual case basis.
Care and Placement Planning		Approaches to behaviour support, including approaches to restraint, are integral to care and placement planning.
Empowerment	Empowering staff and children with understanding and skills.	Raising awareness of rights of children and staff.
Legality	Complying with relevant legislation including human rights obligations.	Identifying the human rights implications in both the challenges a child presents and responses to those challenges; considering the principles of fairness, respect, equality, dignity and autonomy.

Figure 1: Practical application of principles for assessing the quality of behaviour management in children’s homes



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