

# MERRYWOOD HOUSE

## Statement of Purpose



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*Cover Photograph: Group photo from 'The Rachels' awards evening at Merrywood – our take on the Hollywood Oscars!*

## 1 Overall Aims and Objectives

Merrywood House is one of five communities run by the charitable organisation, Childhood First. Our work is based on our Integrated Systemic Therapy (iST) model, which has evolved over 40 years. This is a holistic group-based approach founded on the twin traditions of milieu therapy and systemic psychotherapy.

Merrywood House is a specialist residential therapeutic community for psychologically traumatised young people. We offer an integrated systemic programme of care, therapeutic work and education for up to eight young people of mixed gender, aged 10-18. Placements are for 52 weeks a year with facilitation of all necessary arrangements for contact and work with families and significant others.

Merrywood House provides a safe environment designed for group living and learning. Staff enable and support young people to work through their experiences of past trauma and help them engage as members of a group who are valued collectively and individually. We meet each young person's needs through both individual and group work; how we do this is described throughout this document.

Our aim is to help the young people to develop the ability to create and sustain meaningful and trusting relationships with others; an ability that can be transferred when the young person moves on to another placement or leaves care.

Specifically, for all young people placed at Merrywood House we aim to achieve the following positive outcomes:

- to be safe in the present and to develop ways of relating and skills which will help ensure future safety
- to have a positive experience of being well cared for
- to become healthier, physically and mentally
- to benefit from the experience of play
- to experience positive relationships with reliable adults
- to develop the capacity for making healthy relationships
- to develop emotionally, educationally and socially
- to be able to engage in verbal communication, and that this should be developed as an alternative to acting out difficult feelings in the form of anti-social behaviour
- to develop internal resources (with support) to cope with everyday situations which initially may have caused a great deal of stress
- to develop internal personal boundaries and a sense of autonomous self.

## **2 Care, Education and Treatment**

### **2.1 Ethos and philosophy**

The Childhood First booklet, 'Integrated Systemic Therapy for Traumatised Children & Young people,' describes in some detail the ethos and philosophy on which the care, education and treatment at Merrywood House is founded. Our booklet on iST is held in the home for reference purposes and additional information regarding our approach is available on request. What has been difficult for the young people who come to us is in their relationships with others, and in relationships between those around them. It is by attending to both these aspects that the capacity to relate can be recovered and outcomes in all areas of life are then seen to improve.

Our therapeutic expertise is located in a systemic and psychoanalytic thinking and practice which offers transformative insight, particularly in a group setting, to young people suffering profound emotional or mental trauma.

Robust theory and organisational structures together provide the setting within which the art of healing can take place, and traumatised young people can learn the ability to make healthy attachments, process feelings and relate to others.

Our family systems-based approach allows healthy relationships to develop across the group of young people and adults. The group experience powerfully counters the dangerous sense that many young people have formed that they do not matter to anyone, and nobody matters to them.

In addition our facilities present a warm, creative, extended family home. The environment is of a high quality, and care is taken to ensure it represents security, wholeness and warmth at all times. The young people's participation in thinking about all aspects of living together, including the environment, is a significant part of the group work and treatment.

Where appropriate, young people will have the option to engage in individual therapy which will be identified on an individual basis and in consultation with the young person, placing authority and other professionals.

### **2.2 Admissions Policy and criteria**

Following a referral from a placing authority the Registered Manager will consider young people who are ten or over who meet the following criteria: inadequate early attachment and sufficient intellectual capacity to benefit from the treatment philosophy regardless of their educational attainment. Referral paperwork will then be shared with the Leadership Team and a Referral Panel meeting will be arranged with the wider staff team for discussion.



This will determine the final decision on suitability, taking into account the specific needs of the young person and their ability to function within the existing group. Discussions at the Referral Panel meeting will inform our group risk assessment and impact assessment for the young person.

We will ask the young person's social worker for the following documentation:

- a current statement of needs
- Social Services Care Plan
- a history of previous placements (including an assessment of their success and/or failure)
- a detailed social history
- relevant school reports
- an EHCP (Education and Health Care Plan)
- an educational psychologist's report

We will also invite the professionals involved to visit Merrywood House to see the home and to discuss the young person's needs and the professionals' expected outcomes of their placement. Where appropriate, parents will also be invited to meet us prior to the young person's admission; working with families and the young person's network whenever possible is central to our model.

We expect that each young person who comes has sufficient intellectual capacity to respond to what we offer and we therefore cannot consider anyone who is diagnosed with a psychotic disorder or suffering from significant learning disabilities; nor can we consider those who are significantly physically disabled due to the nature of the premises.

We will carry out an impact assessment to ensure that a placement is in the interests of the young person and the existing group of young people. This is part of our APTT Framework (Assessment, Planning, Treatment, Transition.)

We will also undertake a group risk assessment to identify potential risks of the placement of the new young person both in terms of their impact on the current children's group and vice versa.

### **2.3 Age range, gender and numbers of young people**

Merrywood House can accommodate eight young people of mixed gender aged 10 to 18 years who are unable to live in their own family setting. Young people aged over 18, dependent on individual circumstances and in consultation with statutory agencies, may on occasion remain at Merrywood House for an agreed period of time if this supports the m~~young person~~ in their transition process.

## **2.4 Any special needs of young people accommodated**

The young people who come to Merrywood House have been severely traumatised or psychologically deprived, and they will therefore have special needs relating to their individual life experiences and circumstances. Some have suffered the extremes of neglect, physical, emotional and sexual abuse. Their patterns of attachment are often disordered due to interruptions in early care. Some are dealing with the consequences of overwhelming events from which they have been unable to recover.

These early experiences have had the most serious effect on their ability to function appropriately, either with respect to their own lives, or in relation to others.

## **2.5 Range of needs the home is intended to meet**

Young people who have suffered in this way interact with their environments within the extremes of fear and anxiety, or overconfidence. Some are unable to cope with the demands of almost any new challenge, however small. Others have developed a certainty that any interaction or investment will have a painful outcome.

This is likely to result in young people who come to us being overwhelmed with feelings of worthlessness, low self-esteem, being unlovable and the inevitability of failure. They find it difficult to enjoy themselves, play creatively, learn, make friends, or share in any group activity. They cause concern in others and, while desperate for the reassurance of an adult who will love them, they are unable to trust or to invest in any emotional attachment.

The range of difficulties might include eating disorders, borderline personality disorders, school refusing, self-harm and violence towards others, ADHD, ASD, Asperger's Syndrome, oppositional defiance disorders and obsessive compulsive disorders, together with a variety of attachment disorders.

Young people with disabilities and special needs outside the criteria set out above can be considered for placement, as long as admission criteria are met and we feel we can adapt the care plan to meet their individual needs. Young people with a disability or special need would need to be able to engage in the therapeutic process.

## **2.6 Specific therapeutic techniques used in the home**

Merrywood House offers an integrated programme of care, treatment and education based on psychodynamic and systemic principles. Our document 'Integrated Systemic Therapy for Traumatized Children and Young People' describes in detail the framework and range of groups and facilitators used to support this therapeutic methodology.



All aspects of the programme are regarded as part of an overall living-learning experience from structured education and small discussion groups, through to informal trips out, buying new clothes, interacting with peers and staff, spending time with a key worker, or playing in the grounds. Each young person who comes to Merrywood House is given the opportunity to participate in a wide range of activities in both individual and group situations which will challenge all that they have experienced in the past.

There are many ways the key elements of the treatment process offered by our community could be described. It is the integration of the care, treatment and education offered which constitutes the totality of what we feel is necessary for the successful development of each individual child.

It is through the interaction of each individual with the social and physical environment of the community that the experiential and cognitive levels of the treatment process occur. It is our belief that real psychological change can only be facilitated through addressing the early life trauma experienced and redressing the emotional and psychological imbalances that have occurred as a result of their early years.

We try to create a social and physical environment which in turn will create a sense of hope from the moment a child first arrives; something different to what they have experienced before. This provides each young person with the possibility of an experience that will challenge their conscious and unconscious assumptions about themselves and their expectations of others.

It is also our aim to continuously strive to create a total environment in which each young person will have a compensatory primary experience; this may go some way to redressing the imbalance of their past experiences.

Our treatment model enables us to keep detailed records which inform individual placement plans outlining how the needs of each young person will be met. There is a monitoring process in place to ensure plans are fit for purpose and accurately reflect their individuality as well as their ability to function within the group. Incorporated into the iST treatment model, is a comprehensive and robust assessment framework (Assessment, Planning, Treatment and Transition – APTT). In addition to this, there is ongoing monitoring, evaluation and measuring of outcomes for the young people and the service provided.

## **2.7 Evaluation of the placement**

Childhood First belongs to the Child Outcomes Research Consortium (CORC), and Merrywood House has an assessment, evaluation and research process through which we conduct standardised measures (or questionnaires).

- CGAS - Children's Global Assessment Scale
- Strengths and Difficulties Questionnaires
- Goal-based Measure
- Experience of Service Questionnaire (CHI-ESQ)

These assessments are conducted every six months. The information collated is shared through the Looked After Children (LAC) review process. The information can be accessed in line with data protection guidance and our internal Childhood First Data Protection Policy. In addition there is a tailor-made questionnaire, cross-referenced with Ofsted's domains for evaluating outcomes for children, to ascertain children's opinions about the impact of the Childhood First community on them.

This work is overseen by Childhood First's senior clinician. Where appropriate each young person placed at Merrywood will receive a psychotherapeutic and education assessment. This shapes the work and ensures a baseline to enable us to demonstrate progress and improvement for the young person. Any concerns that arise will be investigated and further assessments requested; e.g. educational psychologist assessment. The psychotherapeutic assessment and CORC data enables all the staff to be aware of the young person's state of mind and informs the placement plan, risk assessments, behaviour management plan and their interactions with the young person.

### **3 Consultation with Young People about the Operation of the Home and Quality of their Care**

In keeping with our therapeutic approach, the culture of Merrywood House is imbued with the need to listen to, value and think with the young people. Our young people are encouraged and supported in expressing their thoughts and feelings about all aspects of their lives, experiences and the quality of the care they receive.

There is a community meeting every Monday for all staff and young people, and a daily meeting for young people and staff on other days. These meetings are a place to share with the young people plans for the day, news of any visitors to the home and wishes and feelings; they are a place for young people and adults to think together about the impact of the past, experience support to manage the present and develop a sense of hopefulness for the future. Other meetings can be called by anyone at any time to address an issue which they feel may be undermining the well-being of the community or any individual within it.

In keeping with our treatment methodology, young people at Merrywood House are enabled to participate in all aspects of their lives and to consciously contribute to activities, daily groups and discussions and, as appropriate, decision-making and complaints. The culture is one of openness, where all opinions are listened to, where young people are valued and respected by the adults and are helped to value and respect themselves and each other. This programme of group and individual work helps young people build on their strengths and identify difficulties.

These systems promote and encourage open communication about all aspects of the young people's lives including everyday living together. Staff teams encourage, listen to and respond to both 'minor' and major complaints and are trained and experienced in remaining alert to young people's welfare at all times. Young people are encouraged to raise concerns and make suggestions for changes and improvements.

It must be understood that the young people at Merrywood House are young and troubled. It is essential that the adults know when it is helpful for young people to be consulted and when it is necessary to make decisions for them.

We also seek their views through our consultation questionnaires; the Registered Manager and another member of staff will meet with young people to discuss their comments and to look for opportunities to improve the service. Young people have a voice about their care, education and treatment.

### **3.1 Children's wishes and feelings**

Young people at Merrywood House can help make decisions about how they want to be looked after and how things should be in the home. There is a range of ways in which the young people can let these be known; by talking to any of the adults, talking in community meetings or using the 'I want you to know' forms which are kept in the dining room. A young person can also ask staff to talk on their behalf in staff meetings about the things that are important for them.

Each young person's right to be listened to is paramount. Staff are therefore highly skilled in listening to and responding to children's individual wishes and feelings, whether these are communicated verbally or in more subtle ways. This is evidenced through the attuned relationships staff develop with the children.

## **4 The Group Environment**

Outcomes from Merrywood House and other Childhood First communities demonstrate that the wide mix of young people and the group work we offer presents significant opportunities to the traumatised young people who come to us, which they are unlikely to find in a less group-oriented setting.

The importance of the peer group in our treatment model is an essential aspect of what makes a placement at Merrywood House so effective a form of treatment.

Young people who come to Merrywood House have been damaged within their relationships with adults and through their experience of witnessing adults' relationships with each other. The consequence of this is that they find themselves unable to relate to others in a productive way. The group environment offers three channels of repairing these problems, which are inextricably linked through a programme of supervision and consultancy.

Firstly, the staff teams work together in a way designed to offer young people healthy experiences of adult interactions, and new forms of dialogue.

Secondly, the adults are supervised in relation to their management of the young people including the impact of the young people on them. They are encouraged in this forum to link their personal experience with the impact of the work, so that they can bring this material to the staff group to work on with others. This enables fruitful exploration for the young people of their impact on others - both peers and adults.

Thirdly, formal and informal groups with the young people concentrate on their communications and relationship with adults and other young people.

Throughout the process of psychotherapeutic change, young people are offered the opportunity to learn new skills and acquire knowledge of the world outside their own emotional spheres and immediate preoccupations. The aim is for them to eventually become responsible for their own lives in a practical, as well as psychological sense.

The work undertaken at Merrywood House focuses on the young person's emotional development and helping him/her to understand the feelings that lead to destructive and anti-social behaviour. This takes place individually with the young person through the provision of one-to-one experiences with an adult and a young person's individual therapy sessions and also in a variety of group settings, including the community meetings and psychodrama sessions.

For some young people the severity of the abuse experienced within a family environment severely impedes their capacity to function in similar settings. Many of the young people who come to Merrywood House have experienced multiple foster placement breakdowns, which we are anxious not to repeat. We aim to equip young people placed at Merrywood House with the internal emotional resources to be able to eventually live in a family setting, with their birth family (if this is in line with the young person's care plan), with a foster family or independently.

Merrywood is by its nature a nurturing environment and also one where over time young people can develop self-confidence, resilience and everyday living skills.

Some young people will be at Merrywood through to 18 years and then (or shortly afterwards) move on to a more independent setting. As this time approaches, we provide them with opportunities to learn and practise skills such as laundry, cooking and budgeting along with coping with relationships with others. We do this individually, in consultation with the child's placing authority. Placing authorities use different formats for this process (~~for example, 'Passport to Independence', 'Transition to Adulthood'~~) and we tailor our plan to fit their particular model.

We expect to remain in contact with young people when they move on – this would be in consultation and agreement with the child and the placing authority. This may be informally, ~~they may wish to continue to attend groups such as psychodrama or join us for coming for~~ Sunday lunch, for example. We may also be commissioned to provide a more formal support package to help them settle in and manage their new environment.

## 5 Equality, Diversity and Young People's Rights

Merrywood House is committed to equality, diversity and young people's rights. Young people are treated with dignity and respect at all times. Staff demonstrate the principles of dignity and respect for others throughout their professional relationships, offering good role models for young people in their care. Over time this enables young people to develop a positive self-view, emotional resilience and knowledge and understanding of their background.

Staff aim to mitigate and repair the effects of stereotyping and discrimination on the grounds of ethnicity, age, gender or level of ability or understanding. They are proactive in making sure that neither they nor the young people are ever treated other than fairly.

The promotion of equality and diversity is intrinsic within the culture of the community at Merrywood House, incorporating acceptance and understanding across all protected characteristics and individual differences.

Staff actively promote a culture of openness and acceptance within the day-to-day life of the community; this includes role modelling in a parental manner, being open-minded and challenging others where there may be differences in attitudes. This is consistent both in one-to-one work with the young people and within the group as a whole.

Young people are encouraged to develop close relationships with staff over time, where they can feel safe to explore their personal beliefs, views, values and attitudes. These relationships also provide a forum for young people to be appropriately challenged and supported with their attitudes or behaviours where necessary.

Ensuring each young person's individual needs are met is part of the planning process prior to placement at Merrywood House. This is then reviewed in consultation with the young person and others, where appropriate, to ensure the young person feels safe in the knowledge that their individuality is embraced and supported. Prior to the admission of a young person their specific ethnic, cultural or religious needs are considered and we endeavour to ensure the resources within the home are sufficient to accommodate these needs, alongside researching local cultural groups or places of worship as appropriate should the child wish to access these at any point.

Merrywood would access support from partners where appropriate to ensure the young person's needs could be met; for example if a young person or their family members did not have English as a first language we would access local translation services in consultation with the placing authority and we would expect this to be built into the overall care planning for the young person.



We give additional consideration to the impact of moving to the Norfolk countryside and support young people with adjusting to a different area, for example moving from an ethnically diverse major city. Whilst we appreciate the importance of ensuring we are adequately prepared to meet a young person's specific needs, we work to ensure that the details of their care and treatment at Merrywood House are ultimately determined by their needs as a young person foremost and in line with their individual wishes and feelings.

We ~~regularly~~ mark a culturally diverse range of festivals and celebrations through activity evenings linked with the experience of new foods. This ensures that all children develop an understanding and appreciation of a range of cultures alongside traditional UK celebrations.

### **5.1 Anti-discriminatory practice**

Every effort is made to ensure that Merrywood House is welcoming to all young people, their families and others significant in their care and well-being. The Registered Manager monitors the range of children placed within the community in terms of ethnicity, gender and disability, to ensure the service provision is reaching all and not creating barriers to particular groups.

Young people are offered opportunities to try out new experiences, which are not restricted by traditional gender options. Young people have the right to express their views freely in all matters affecting them and staff are expected to challenge attitudes, behaviour and language that are non-inclusive and discriminatory, in a positive way.

### **5.2 Young people's rights**

Young people are encouraged and supported to understand their rights. It will be made clear to them how they can raise any areas of dissatisfaction. This may include perceived unfairness or any form of discrimination. Young people are encouraged to express their views about the home and the care they receive and if necessary can be supported by an independent person. Young people are made aware of the complaints procedure which they can follow should any concern require a more formal response.

## 6 Health

Although particular significance is given to a young person's emotional health we believe a young person's physical well-being is no less important.

Each young person who comes to Merrywood House is registered with our local doctor's surgery, dental practice and optician. It is our practice that young people have an annual health assessment and regular medical, dental and optician check-ups. Their wishes in terms of whether they are more comfortable with a male/female practitioner are always respected. Where appropriate, young people are consulted about their health and can contribute to their health plans.

We have written procedures relating to the storage, recording and administration of medication, both prescribed and non-prescribed (for example, cough linctus), and staff receive medication training to ensure best practice.

The young people are encouraged to discuss openly and frankly all aspects of their health and well-being, although young people are also accorded their right to privacy and confidentiality.

In relation to wider health education issues, such as sex education, smoking, alcohol and substance abuse, there are links with the LAC professionals in the area and individual programmes will be discussed as and when required with both the young person and others as appropriate.

Where appropriate, and following a risk assessment, some young people may on occasion self-administer their medication. This will be based on a range of factors and will be regularly reviewed.

### 6.1 Exercise

Every young person is encouraged to take exercise in a way that they enjoy. Adults are available to join in and organise games and sports. There is a wide range of informal and formal opportunities to exercise including individual activities (e.g. walking, bike-riding, gym); group games (e.g. football) and organised classes and team sports (e.g. dance, football-trainingrugby) through to pursuing more specialist hobbies like horse riding. These activities are provided for their physical health benefits as well as their contribution to emotional development and well-being.

Relaxing, resting and being able to sleep well are essential for young people and part of our treatment programme is to help them use opportunities to rest and relax and give their minds and bodies opportunity for quiet and replenishment.

All young people are supported at bedtimes with individual attention based on their personalised needs to best enable them to make the transition into sleep and being on their own.

## **6.2 Diet**

~~Eating well has a direct impact on physical health.~~ All young people are provided with a balanced diet and helped to develop healthy eating patterns. They are encouraged to become involved with menu planning, the preparation of meals and to engage in conversations and meetings about what they like to eat and about the food provided. The provision of good food and the ability to accept it is also recognised for its contribution to development, identity and emotional health.

Therefore attention to detail in the way food is prepared is essential to maximise this contribution. Young people are also helped to join group mealtimes together as a social occasion; cultural differences in food are celebrated and all young people are encouraged to try different dishes so that they have experiences of a range of cultures. Young people with different dietary requirements are supported through their individual plans and in consultation with health professionals.

## **6.3 Smoking – tobacco and e-cigarettes**

Merrywood House has a non-smoking policy for young people, staff and visitors, which includes vaping. Should it be planned for a young person who was nicotine dependent to join the community, medical advice would be sought to manage the impact of nicotine withdrawal. Young people of over 16 years might choose to start smoking/vaping but we will always attempt to dissuade them from doing so and ensure that they have access to medical information about the risks to their health and how to stop.

## **6.4 Alcohol, drugs and illegal substances**

No form of alcohol or recreational drugs will be allowed on our premises. Social workers and families would be informed if any young people attempted to access these substances and consideration given to police involvement where appropriate.

## 7 Education and Training

Our Integrated Systemic Therapy considers that alongside their care and treatment it is essential that young people receive education which is similarly adapted to their emotional state and which can deliver the best possible educational outcomes.

Specifically, we aim to help each young person 'catch up' educationally, as far as possible, before they leave us; to help them achieve as much as their abilities and time permit; to provide the opportunity to gain formal, nationally-recognised qualifications whenever possible, to provide a range of creative and sports studies and a wide range of practical skills, all of which help the young person achieve a true sense of worth.

When a young person is placed at Merrywood House, their educational needs are carefully considered as to whether these can be maintained in mainstream education with or without a classroom assistant; if the young person has an EHCP or other educational assessment, this will be built into their ir overall plan ~~for the young person~~.

Young people are encouraged to ~~use the library and~~ visit places of interest related to their individual interests and school projects. We aim to develop a culture of reading for enjoyment. We offer one-to-one support while young people complete their homework whilst encouraging independent study; a separate quieter room is available for this purpose.

We work in partnership with schools and social workers to meet particular needs of our young people and we are regularly informed about their educational progress. We also attend PEP meetings and parents' evenings.

### 7.1 The education structure

Where possible, all of the young people at Merrywood House are in full-time education. Their educational placements are assessed on an individual basis to suit their needs. We have good links with local schools, and where attending school is not appropriate for a child at any point, we may in some cases be able to arrange for a home tutor.

A good understanding of the young person's experience of education is essential to enable us to help them engage with the process of attending and learning. A gradual return to education may be appropriate for some young people. There may also be good reason to authorise an absence from education, for example if a young person is not physically or mentally well enough to attend. However, if the young person's needs cannot be met in their current provision and they have been or are in danger of being permanently excluded, we will work with education colleagues to identify a next step.

When a young person refuses to attend education without good reason, staff will reinforce the importance of education and may implement a consequence to emphasise expectations.

## 7.2 Training

~~Where practicable, we arrange training for e have recently started to develop an idea to introduce~~ the young people ~~so that they may to~~ acquire~~ing~~ new skills to equip them for the next phase in their development. We do not expect a standardised programme to fit all, appreciating that the children will have different requirements according to age and other factors. Training is delivered either in house or by external providers.

## **8 Young People's Participation in Recreational, Sporting and Cultural Activities**

Activities form an important building block in a young person's life. Young people benefit enormously from individual and group activities in terms of social interaction with their peers and building their self-esteem. Young people at Merrywood House are encouraged to experience a variety of activities and any individual interests and hobbies will be supported, in line with their placement plans and risk assessments.

There is a wide choice for the young people; horse-riding, dance classes, music lessons, swimming, gymnastics, ~~karate~~rugby and football clubs are ~~very~~ popular, and community-based activities can be arranged too. There are also opportunities for group trips to activity parks and other places of interest. During school holidays staff organise a programme of events to keep the young people entertained.

Discussions with each young person establish an activity framework which benefits them individually and which is reflected in their placement plan. Whatever the activity, young people will be supervised as needed by appropriately trained staff.

As the young person progresses, they are encouraged to join groups. This creates a link to the local community and enables relationships to be developed outside of Merrywood, something that also supports young people in their transitions and to develop their independence.

## **9 Promoting Appropriate Behaviour, Control, Restraint and Discipline**

It has always been the policy at Merrywood House that the foundation to achieving the task is the fostering of positive relationships between the adults and the young people within a clearly defined set of boundaries. These in turn are established only by the existence of good, and appropriately professional, interpersonal relationships between the adults and the young people.

These relationships provide a sense of containment, through a consistent but appropriately flexible understanding of the many different situations that must be managed on a daily basis. This is approached always through a sense of personal concern and commitment to each young person.

The histories of the young people with whom we work are such that the focus of their personal development is inevitably taken up through the interplay of their past conflict and trauma in the present. The crossing of community boundaries is an inevitable part of the work with our young people, while they struggle to begin to establish a more trusting and co-operative partnership with those around them.

The management of difficulties is often the focus of small groups, meetings with key workers and staff, and community meetings. Young people are encouraged and supported in raising matters which concern them. Each young person is helped towards a sharing of the responsibility for group and individual well-being, and to have a voice which is heard and treated seriously. Acknowledgement and understanding are generally the main aim of such a task, but occasionally a sanction may be seen as an appropriate response.

Individual risk assessments enable staff to make informed judgements, in conjunction with each young person's individual behaviour management plan which details the responses that are used in consultation with the young person.

There is a systematic process of assessing risk, determining strategy and informing practice around a young person. The use of this process ensures that everyone concerned is aware of the steps that may become necessary to keep the young person safe. A copy of our behaviour management policy is available on request.

### **9.1 The creation of positive relationships**

Our therapeutic approach is formulated on the creation of positive relationships. Young people are helped to understand the impact of their behaviour on others, and to express their feelings about others' behaviour. High levels of supervision and guidance are offered to encourage behaviour and relationships which have a beneficial impact for themselves and others.



Achievements and participation are celebrated and rewarded. Where behaviour is unacceptable or has a destructive impact, it is responded to with consistency and clarity within a context of understanding the particular young person's history as well as the group dynamic.

Relationships between staff and young people at Merrywood House are based on honesty, mutual respect and understanding. The staff teams maintain clear, safe, consistent and understanding boundaries for the young people.

Rewards and sanctions are part of the mechanisms for care and control within the context of thoughtful, consistent relationships and are monitored by the Merrywood leadership team ~~within Merrywood~~ to ensure that they are proportionate to the event.

Where a sanction has been the appropriate response, there will be opportunity for young people to reduce or indeed lift the sanction dependent on the individual circumstances, creating a positive outcome for the young person.

## **9.2 Restrictive physical intervention**

Physical restraint is permitted only in circumstances when a young person may be intent on causing harm to him/herself or to another person, or causing serious damage to property, and when all other methods of de-escalation have failed.

Staff will dynamically assess the situation and only consider employing restrictive physical interventions if the risk of not doing so outweighs the potential physical and emotional risks of the restrictive intervention. In all cases where a restrictive physical intervention occurs, this is viewed as an absolute last resort, with a trauma-informed approach, and emphasis given to the method used being safe, effective and acceptable. We aim to provide young people with a sense of being 'held' and not punished, and in being looked after and not humiliated. A young person is held only for the minimum time until the risk of disengaging reduces to a safe level.

Individual Risk Assessments are completed for each young person in relation to physical intervention.

Our physical intervention procedure is available in the home or can be accessed via Childhood First Procedures Manual using the following link:

<https://childhoodfirst.trixonline.co.uk/>

<http://childhoodfirst.proceduresonline.com/index.htm>

Merrywood House staff have been trained in Crisis Prevention Institute (CPI) Safety Intervention methods ~~by . Our Director and Clinical Case Administrator are our two in-house certified~~ CPI instructors ~~who~~and schedule regular training for new staff and full annual refresher training for existing staff. Risk assessments for each CPI restrictive intervention are held on our server.

### 9.3 Rewards

Rewards for thoughtful and acceptable behaviour are most often in the form of praise and encouragement within individual conversations and the group forums. Contribution to and participation in the group is noticed and encouraged. Small achievements are praised and noticed in the context of young people's own difficulties, struggles and efforts in this area rather than relative to each other's. Evidence of some of these can be found in the notes of community meetings and specific rewards are recorded.

### 9.4 Sanctions procedures

Sanctions are used as part of establishing positive relationships with young people to maintain boundaries and control. When used, the aim is to encourage thought around restitution and reparation; the notion that mistakes or wrong-doing can be repaired and things, (including people) can be 'made better'.

The sanctions we impose are usually related to a particular incident and are designed to help the child understand, when they are unable to do so through conversation, that there is a consequence to their behaviour.

Managing communal boundaries in the community is a good indication that a child will manage group outings in an appropriate way. Therefore, 'grounding' may follow a serious incident but this will never apply to any educational or family visit. Fines are not used at Merrywood House and pocket money is only ever deducted in the context of reparative payment for damage caused.

We invite young people to give their views of any sanction imposed and the Registered Manager will review the effectiveness of any sanction.

The following are permissible sanctions:

- Restitution – 'making good' or 'putting things right' – can be financially through pocket money contribution
- Reparation - helping to repair damage
- Limitation of leisure activities
- Time out - space away from the group (with/without staff)

- Grounding

Increased supervision or restrictions on the availability of transport are used as a tool for safe management but not as a sanction.

## **9.5 Prohibited methods of control**

None of the disciplinary measures prohibited under Regulation 8 of the Children's Act 1989 have ever been permitted at Merrywood House. No resident is allowed to be subjected to corporal punishment, deprivation of food or drink, restrictions of visits or communications with family and friends (except where young people need protection from a particular communication or visit), the wearing of distinctive clothing, physical restrictions imposed by accommodation, deprivation of sleep or intimate physical searches.

## **9.6 Deprivation of liberty**

By the very nature of our work at Childhood First in providing a service to psychologically traumatised children and young people we may on occasion adopt practice that could constitute a restriction of liberty (The Law Society) such as the physical restraint of children and increased monitoring and supervision that would be normal and good practice in a range of circumstances. Failure to monitor and supervise children and young people dependent on their age, understanding and vulnerability would be negligent.

The best interests of children and young people are best protected by open, transparent and honest practice. Therefore individual practice with children and young people will be undertaken in consultation with placing authorities and, where appropriate, with children and young people and their families. All interventions with children and young people including any practice that may constitute deprivation or restriction of liberty will be subject to regular review and consultation with the placing authority to ensure legal permission is sought if required.

## 10 Safeguarding

Childhood First is committed at every level to safeguarding and child protection in particular in order to promote young people's welfare. We take seriously our duty to protect every young person from abuse and maltreatment and to prevent impairment of health or development.

Our Safeguarding Policy is available on request and underlines our commitment to interagency working. We have established a good relationship with the LADO. All concerns of a child protection nature will be referred by the Registered Manager to the local authority. In any circumstances where safeguarding procedures are undertaken, the young person's social services and parents, where appropriate, will be kept closely involved and informed as required by Working Together to Safeguard Young People 2018. Child Protection matters are directly dealt with by the Registered Manager.

On admission the risk assessment undertaken for each young person will cover all aspects of safeguarding and will be regularly reviewed to ensure that any new behaviours or historical information disclosed can be factored into our response in the safeguarding of the young person.

All staff receive regular safeguarding training ~~together with support and guidance in safeguarding and promoting young people's welfare~~ on an annual basis together with day-to-day support and guidance in safeguarding and promoting young people's welfare. Additional safeguarding training can be implemented if felt appropriate or linked to a specific area ~~such as child exploitation~~.

### 10.1 Radicalisation of children

Staff at Merrywood House have an awareness that children can be drawn into violence or they can be exposed to the messages of extremist groups by many means, including the influence of family members or friends, direct contact with extremist groups and through the internet. Staff understand that this can put a child at risk of being drawn into criminal activity and has the potential to cause significant harm. The high supervision levels of the children at Merrywood and careful risk assessment in relation to children spending time off-site independently or attending clubs/groups significantly reduces the risk of radicalisation. Staff seek to remain vigilant to potential indicators to radicalisation.

### 10.2 Preventing bullying

Merrywood House does not tolerate any form of bullying and is committed to developing a culture within which all individuals are supported in confronting both the external bully and the potential for themselves to bully others.

We strive to create and maintain an environment where young people are treated with dignity and respect at all times.

All staff are vigilant for signs of bullying and any concerns are brought to the attention of the Registered Manager and other senior staff. There is a clear system for reporting, tracking and responding to incidences of bullying. If bullying occurs, a young person will be encouraged and supported in expressing their concerns through open communication. Internally this could be either in the community meeting or to an individual member of staff.

All young people are given information regarding appropriate external contacts should they feel that the internal route is inadequate for any reason. Any incident of bullying would be reported to a young person's social worker on a serious incident form. The Registered Manager and Leadership Team review any such incidences and take these back to the community for processing and resolution.

### 10.3 Child Exploitation

Staff ~~have~~ attended training in the risks associated with child exploitation, including sexual and criminal exploitation, which may involve 'County Lines' activity. Direct work and interventions with the young people will be considered on an individual basis. The leadership team ensures that the assessment of associated risks is integrated within each child's individual risk assessments, e.g. arrangements for taking children to/from schools, arrangements enabling older young people to go out independently.

The close partnership working ethos within the staff team, alongside the expectation for open communication in relation to all areas of the children's care, helps to minimise the risk of exploitation from within the home.

We undertook a thorough Location Assessment in August 2023<sup>34</sup>. The assessment concluded the location of Merrywood House is suitable for our purpose of residential therapeutic childcare. Additionally the high supervision levels of the children at Merrywood House minimises risks associated with our location.

### 10.4 Internet safety

Staff complete e-safety training during induction ensuring they are well-informed as to the risks associated with use of the internet. This training is refreshed at regular intervals.

Due to the vulnerability of the young people placed at Merrywood House their use of the internet is fully risk-assessed and an appropriate level of supervision applied in response. The default approach is time-limited access with full, 1:1 adult supervision. Level of access may be progressed/decreased if it is felt that a young person can use the internet safely

and appropriately. This will be managed with a gradual lessening of supervision levels and time constraints, and will always be a decision made in consultation with the child's local authority.

We use a range of educational resources to support young people in understanding the risks associated with the internet and how to keep themselves safe, as appropriate to their age and level of understanding.

Childhood First uses an IT surveillance system called "Securus" which enables the Registered Manager to pick up key words that staff and children input into the Childhood First system through emails, reports, etc. This provides an early alert to any potential safeguarding concerns about staff practice and enables similar monitoring of children's use of the internet.

### **10.5 Significant events**

Events and Notifications under Regulation 40 of the Children's Home Regulations are sent to the required authorities as well as to the Chief Executive (Responsible Individual). Notifications are held confidentially within the home and are cross-referenced with other systems such as referrals to LADO. These are monitored by the Registered Manager and through the Regulation 44 process.

### **10.6 Female genital mutilation**

Staff are aware of the issues associated with female genital mutilation (FGM) and in particular of our legal duty to inform Children's Services should we suspect or know of any child who has been or may become subjected to FGM.

### **10.7 Searching Children/Bedrooms**

It may be appropriate to conduct a search of a child or a child's belongings, including the searching of their bedroom, if there is reasonable cause to believe that they have concealed weapons, illegal drugs or other items which may place them or others at risk of significant harm. If there is suspicion that such items are concealed staff will attempt to obtain the items with the child's cooperation and give the child the opportunity to hand over the suspected items. In the event where the child does not wish to cooperate, our Searching Children/Bedrooms procedure will be followed by a member of the Leadership Team and the child's social worker, unless in extreme circumstances where it is felt that the child is at immediate risk. The appropriate record will be made.

## **11 If a Young Person goes missing**

In the event a young person goes missing, our Missing from Care Procedure is followed alongside the individual child's protocol as set out in their placement plan.

The senior member of staff is immediately informed and co-ordinates the search for the young person while also ensuring that the rest of the young people's group is properly supervised. There are occasions when staff will be able to keep the young person in sight and encourage them to return to the house. Where this is not possible, Merrywood House will work with police and placing authorities to locate the child and ensure their safety.

During normal office hours, the young person's social worker will be contacted. If unavailable, information will be passed to the duty social worker. In the evenings and at weekends, relevant emergency duty teams are contacted. Details of the event are passed to the Registered Manager immediately.

Merrywood has, as required, an agreed protocol with the local police to ensure partnership working and this is reviewed annually/regularly. In addition, we are adopting the Philomena Protocol with regard to information made available to the Police when a young person goes missing.

### **11.1 Action taken when the young person returns**

The young person will always be welcomed back to Merrywood House in a non-punitive way; space being given by staff to reassure them and assess any immediate needs, e.g. for medical treatment, food, drink, warmth, etc.

If possible, the staff would determine where the young person has been and with whom, although this would be approached with sensitivity, recognising that they may be tired and frightened, depending on their experiences while absent. Other agencies/persons involved in the search for the young person would be informed as soon as possible of their safe return.

The young person will be seen by an independent person as soon as is practically possible after their return, to explore the reasons for their absence and to check on their well-being.



## 12 Contact between Young People and Parents, Relatives and Friends

We facilitate, where possible, positive contact between a young person and their family and friends, or with other significant individuals who have been important in their background. For those young people with little or no family contact we try to support the placing authority in identifying significant external contacts. This includes working with parents and Children's Services to ensure that contact is beneficial to the young person. Contact and visits to Merrywood House by parents and significant others will be by arrangement between the young person's social worker and staff. These arrangements will be in accordance with the young person's care plan.

We wish to foster a normal home environment for our young people and we promote positive and normal friendships within their peer group. Young people will be encouraged supported to invite friends to visit Merrywood and to visit friends within their homes. We have a separate space where family and friends can spend time without intruding on the rest of the home and which offers them privacy.

## 13 Cultural, Linguistic and Religious Needs

Merrywood House does not follow any formal religious observance, but young people who wish to practise a particular faith are supported in doing so individually.

We consider that fostering a young person's growth in understanding this world, including their cultural and any religious inheritance, is an important aspect of their well-being and we look to nurture this growth.

Merrywood House makes sure that young people are supported in their wishes and in the wishes of parents and guardians regarding their particular cultural and religious inheritance. We would, however, challenge an understanding of any culture or religion which was disrespectful of others.

Young people who wish to maintain a religious observance, or to attend a religious institution, are helped to do this with the support of staff and they are encouraged to explore and develop their own beliefs. Access to religious institutions will be facilitated as required. Dependent on the individual needs of the young person we will ensure suitable quiet areas in the home are available for them to practise their religion and this will be built into their individual care planning process.

As mentioned elsewhere, if a young person or their family members did not have English as a first language we would access local translation services in consultation with the placing authority and we would expect this to be built into the overall care planning for the young person.

## **14 Complaints**

### **14.1 Complaints by young people**

If young people feel that they have been treated unfairly or inappropriately in any way, they can complain to their key worker, to any member of staff, or to the Registered Manager.

The designated Complaints Officer at Merrywood House is the Registered Manager; if the young person's complaint is about the Registered Manager the young people can access more senior staff at Head Office, or indeed use an external agency to express their concerns.

If any young person wishes to make a complaint to a person outside of the community, they may do so directly to their own social worker, Ofsted, Childrens' Commissioner, Regulation 44 visitor, parent or other person with whom they feel they can speak. They may also contact directly, either by telephone or by letter, the Complaints Officer for their individual placing authorities.

A leaflet is available to all young people at Merrywood called "I want you to know", which provides telephone numbers of external organisations, such as 'Childline', Ofsted etc.

It remains our policy that we will seek to resolve complaints internally where possible but where they must be taken up at a formal level, our complaint procedure will be followed and the appropriate record made. If necessary, the placing authority's complaints procedure may be invoked.

### **14.2 Complaints by employees**

It is the policy of Childhood First that, wherever possible, complaints and grievances shall be resolved ~~in an informal manner~~ informally, firstly by the establishment of a climate in which staff are encouraged and expected to address issues of concern and conflict at source. This informal framework and culture is supported by a formal procedural framework, which guarantees that any complaints shall be addressed appropriately where informal means have failed; this is undertaken in consultation with HR.

### **14.3 Complaints by third parties**

Where an external agency or other third party has a concern or complaint about any aspect of the work of any part of Childhood First, of its directors, staff or clients, then it would be our wish that this be raised at the earliest opportunity.

It would be the Registered Manager's aim that the concern or complaint should be resolved informally, where possible, unless more formal action is appropriate or necessary, and in which case it shall be the Registered Manager's responsibility to support this action.

Our complaints procedures are available in the home or can be accessed via Childhood First Head Office.

#### **14.4 Data Protection**

In compliance with the General Data Protection Regulations (2018) Childhood First is committed to being transparent about meeting its data protection obligations and how it collects and uses the personal data of those in our care, their families and wider networks as well as our workforce. Our policies relating to data protection and records management can be accessed via the Childhood First Procedures Manual. (See link below.)

<https://childhoodfirst.trixonline.co.uk/>

~~<http://childhoodfirst.proceduresonline.com/index.htm>~~

## **15 Facilities and Services**

Merrywood House is a detached property with accommodation on two floors. The home provides a warm and friendly environment, furnished and decorated to a high standard; its spaciousness provides areas for group work as well as allowing for individual space. There is a fully-equipped kitchen and dining room, quiet areas and recreational space. The colourful mural painted on the walls of the communal lounge is a representation of the individual children living at Merrywood. On arrival, they are asked to suggest an image that they think would represent them in some way and this is then added to the design by a local artist. This feature is a vibrant expression of their backgrounds and individuality and has become a focal point for the children and visitors to Merrywood.

Outside, there is a large, safe garden that is laid to lawn where young people are encouraged to play. A covered patio with pergola and seating offers a relaxed social space for warmer days. We also have two garden buildings, providing cosy spaces for smaller meetings and for the children's one-one therapy.

Our rural setting is in commuting distance of the city of Norwich and the market town of Dereham with easy access to resources that can provide support to young people in meeting their individual needs and interests. There is a local bus service.

Two comfortable sleeping-in rooms are provided for staff, one upstairs and one downstairs.

## **16 Accommodation and Room Sharing**

Young people do not share bedrooms. Their bedroom is their own personal and private space. Therapeutic staff help young people to take care of their rooms as appropriate. Being aware of the state of a young person's room gives insight into their state of mind and well-being. Wherever possible, young people are actively involved in making decisions about their bedrooms; for example furnishings, colour and presentation. All bedrooms are furnished and decorated to a high standard, taking into account the individual needs of the young people. Young people are encouraged to personalise their bedrooms and this may reflect their cultural and religious backgrounds etc.

Each young person has a private lockable drawer or cupboard in their room solely for their use. All furnishings and fittings conform to health and safety regulations.

## 17 Surveillance within the Home

A buzzer system connected to each child’s bedroom door alerts staff if it is opened. During the night this allows staff to respond promptly to a child in need. This provision is to safeguard the young people and allows staff to manage the risk of them being able to gain access to one another’s rooms or leave the building unnoticed.

## 18 Fire Precautions and Emergency Procedures

Merrywood House has written statements in relation to fire precautions and evacuation procedures, which are known to young people and adults and which are reinforced by regular and recorded fire drills. Our Fire Safety Policy details responsibilities, recordings, drills, procedures, training and assembly points.

Staff are aware of our Health and Safety policy and they contribute to regular risk assessments covering all aspects of the home and specified trips beyond our community.

Merrywood House has in place a Business Continuity Plan which sets out the actions that would be followed in the case of an emergency.

## 19 Registered Provider and Registered Manager

Merrywood House is leased and managed by Childhood First, whose Registered Office is at Childhood First, 210 Borough High Street, London SE1 1JX. The Registered Manager is accountable to the Chief Executive.

## 20 Qualifications and Experience

Registered Provider	Gary Yexley, Chief Executive Officer Institute of Integrated Systemic Therapy & Childhood First
Qualifications:	MBA (Dist), Leadership and Management in Healthcare, (Cant Univ), MA (Tavistock), Psychoanalytic Observational Studies, Child Psychotherapeutic Counsellor, UKCP Reg.
Professional Experience:	Therapeutic Services Director, Institute of Integrated Systemic Therapy & Childhood First, Registered Manager and Director Greenfields House and Gables House.

Registered Manager	Rachel Sillis, Community Director, Merrywood House
Qualifications:	NVQ 3&4 Health & Social Care (Children and Young People), NVQ4 in Leadership and Management, iST Practitioners Diploma, PSC3050 Supervising Psychosocial Care Practice, UKCP Child Psychotherapeutic Counsellor.
Professional Experience:	Worked within children’s residential homes for 20 years, including seven years as a Registered Manager.

## 21. Staff

Staff are appointed after a rigorous recruitment process which involves Warner and formal interviews, together with questions submitted by the young people when this feels appropriate. All appropriate checks are carried out according to current guidelines before any prospective member of staff begins employment with us. Candidates are invited to visit Merrywood at least once before they begin work, to meet with staff and children and to look round the house.

### STAFF TEAM

#### Leadership Team

Name and Position	Relevant Qualifications	Relevant Experience
Deputy Director	Adv Dip Psychosocial Care. PSC3050 Supervising Psychosocial Care. iST 3011 Bridging Module. Practice Leadership & Mgmt Level 5 Dip. MA Group Dynamics. UKCP Child Psychotherapeutic Counsellor	Commenced 2008  Prior: Team Leader, Key Worker and Assistant Director at Merrywood
Assistant Director	iST Certificate. iST Practitioners Diploma. MA Child Mental Health, MA Group Dynamics, studying MA Research Methods. UKCP Child Psychotherapeutic Counsellor	Commenced 2016  Prior: Team Leader and Key Worker at Merrywood
Assistant Director Statutory Compliance	Extensive administration qualifications	Commenced 2011  Prior: Statutory Compliance Administrator for Earthsea House and Merrywood House
Assistant Director	iST Certificate. iST Practitioners Diploma and PSC3050 Supervising Psychosocial Care. UKCP Child Psychotherapeutic Counsellor	Commenced 2016  Prior: Therapeutic Care Worker, Key Worker and Team Leader at Merrywood



## Care Team

<u>Name and Position</u>	<u>Relevant Qualifications</u>	<u>Relevant Experience</u>
<del>Care Team</del>		
<del>Name and Position</del>	<del>Relevant Qualifications</del>	<del>Relevant Experience</del>
Team Leader	iST Certificate. PSC3050 Supervising Psychosocial Care	Commenced 2019  Therapeutic Care Worker, Key Worker and Deputy Team Leader at Merrywood
Team Leader	NVQ 4 Health and Social Care – Children and Young People. iST Certificate. Studying iST Practitioner's Diploma	Commenced 2021  Prior: Therapeutic Care Worker and Key Worker, Deputy Team Leader at Merrywood.
Team Leader Key Worker	BSC Psychology with Counselling, iST Certificate. iST Practitioner's Diploma and PSC3050 Supervising Psychosocial Care. MA Child Mental Health. UKCP Child Psychotherapeutic Counsellor	Commenced 2021 <i>Therapeutic Care Worker and Deputy Team Leader at Merrywood (previously employed at Merrywood 2019-20)</i>
<del>Deputy Team Leader AR</del>	<del>Level 3 Diploma in Health &amp; Social Care. iST Certificate. iST Practitioner's Diploma. PSC3050 Supervising Psychosocial Care</del>	<del>Commenced 2019  Therapeutic Care Worker at Merrywood</del>
Deputy Team Leader Key Worker	iST Certificate. Studying iST Practitioner's Diploma	Commenced 2021  Prior: Therapeutic Care Worker at Merrywood
Deputy Team Leader Key Worker	BTEC Level 3 Diploma in Health & Social Care. iST Certificate. Studying iST Practitioner's Diploma	Commenced 2021  Prior: Therapeutic Care Worker at Merrywood
Acting <del>Acting</del> Deputy Team Leader	iST Foundation course. Studying iST Certificate	Commenced 2023  Prior: Deputy Manager, adult care home, Therapeutic Care Worker at Merrywood
Waking Night Staff	Level 3 Diploma in Health and Social Care	Commenced 2012  Prior: Childcare Provider

Name and Position	Relevant Qualifications	Relevant Experience
Therapeutic Care Worker	NVQ Level 3 - Health & Social Care. iST Certificate. iST Practitioner's Diploma. MA Group Dynamics	Commenced 2017  Key Worker at Merrywood
Name and Position	Relevant Qualifications	Relevant Experience
Therapeutic Care Worker <i>Key Worker</i>	iST Certificate. Studying iST Practitioner's Diploma. MA Child Mental Health	Commenced 2019
Therapeutic Care Worker	iST Foundation course. iST Certificate. Studying iST Practitioner's Diploma	Commenced 2022  Prior: Clinical Case Administrator at Merrywood House
<del>Therapeutic Care Worker NA <i>Key Worker</i></del>	<del>iST Foundation course. iST Certificate</del>	<del>Commenced 2022</del>
Therapeutic Care Worker <i>Key Worker</i>	iST Foundation course. iST Certificate. Studying iST Practitioner's Diploma	Commenced 2023
Therapeutic Care Worker <i>Key Worker</i>	iST Foundation course. Studying iST Certificate	Commenced 2023  Prior: Field Support Supervisor (vulnerable adults) residential children's support worker
Therapeutic Care Worker <i>Key Worker</i>	iST Foundation course. Studying iST Certificate	Commenced 2024  Prior:
Therapeutic Care Worker <i>Key Worker</i>	iST Foundation course. Studying iST Certificate	Commenced 2024  Prior:
<del>Therapeutic Care Worker CAR</del>	<del>Studying iST Foundation course</del>	<del>Commenced 2024  Prior: Healthcare Worker</del>
Therapeutic Care Worker	Studying iST Foundation course	Commenced 2024
Therapeutic Care Worker	Studying iST Foundation course	Commenced 2024

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		Prior: Care Worker
Therapeutic Care Worker	Studying iST Foundation course	Commenced 2024 Prior: Care Coordinator
<del>Name and Position</del>	<del>Relevant Qualifications</del>	<del>Relevant Experience</del>
<u>Name and Position</u>	<u>Relevant Qualifications</u>	<u>Relevant Experience</u>
Therapeutic Care Worker	Studying iST Foundation course	Commenced 2024
Therapeutic Care Worker	Studying iST Foundation course	Commenced 2025

Administration and Auxiliary Staff

Name and Position	Relevant Qualifications	Relevant Experience
Receptionist/Administrator (p/t)	Extensive administration qualifications	Commenced 2016  Prior: Receptionist, Earthsea House
Course Tutor	BSC Hons Psychology. iST Certificate. iST Practitioner's Diploma	Commenced 2021  Prior: Therapeutic Care Worker and Key Worker at Merrywood
Administrator (p-t)	Extensive administration qualifications	Commenced 2022  Prior: Judicial Assistant, School Office Manager
Receptionist / Administrator (p/t)	-	Commenced 2023  Prior: Sales & Operations Manager for clothing company
Placement & Family Support Worker	iST Foundation course. iST Certificate. iST Practitioner's Diploma. UKCP Psychotherapeutic Counsellor. MA Child Mental Health	Commenced 2023  Prior: Deputy Team Leader and Key Worker at Earthsea House
Maintenance Assistant	IST Foundation course	Commenced 2023  Prior: Computer Engineer
Child & Adolescent Therapist (p-t)	iST Foundation course. BA Hons English Literature & Psychology, PG Diploma Child & Adolescent Psychotherapeutic Counselling	Commenced 2023  Prior: Counsellor, Teacher (Head of English Dept)
Cleaner (p-t)	Studying iST Foundation course	Commenced 2024  Prior: Nursery Worker



## **22 Staff Supervision, Training and iST**

### **22.1 Supervision**

Central to Childhood First's Integrated Systemic Therapy is that staff work within a comprehensive framework, which emphasises a thorough understanding of the young people and of themselves in relation to the task.

Our staff receive individual supervision. This is usually given by line managers, all of whom are experienced practitioners. This is to facilitate reflection and thinking about the overall task. Staff also participate in small team dynamics and group dynamics meetings. This work is supported by a group analyst who is employed by Childhood First. These meetings offer a range of ways of understanding the history, inner world, current functioning and impact of the young people as individuals and as a group, as well as exploration of the impact of the adults on the young people.

### **22.2 Training and iST**

#### *iST Training Pathway*

Childhood First is committed to in-depth and embedded staff training within our communities. Our work-based training programme has been developed in partnership with and is accredited by Middlesex University. We have introduced integrated Systemic Therapy (iST) to our organisation as it lays the foundation of our care and treatment of the children and the professional development of our staff. The training is comprised of three strands; theory, supervised practice and experiential learning which builds employees' understanding of the effects of adverse childhood experiences on the young people and how they understand the emotional and behavioural needs of the young people in their day-to-day work. It encourages reflective practice ensuring an inclusive environment which utilises relationship-based healing. Through the three strands, staff are able to better understand the unconscious processes and emotions evoked in them to ensure a child-focussed approach in their practice.

The aim of the iST programme is to provide practice-based training for professionals caring for children with complex emotional and psychological needs. iST training is professionally accredited by United Kingdom Council for Psychotherapy (UKCP) via the College of Child and Adolescent Psychotherapies (C-CAP) and academically accredited by Middlesex University. Once staff have successfully completed the iST Foundation course, they are enrolled onto the iST1000 Certificate Course. This

qualification has been judged to exceed the Diploma 3 (in line with Regulation 32) and this is something that is reviewed annually.

Following these statutory requirements, those who successfully complete their Practitioner's Diploma in iST and a 1:1 Preparation Course, if nominated, can qualify as clinically-qualified, UKCP-accredited child psychotherapeutic counsellors.

Childhood First has been approved as a 'Training Organisation' by the UKCP. This means that some of our staff have become UKCP-accredited child psychotherapeutic counsellors and newer staff will be able to work towards this accreditation by:

- Completing 450 hours of clinical practice hours from the beginning of their CPC Pathway
- Completing the iST Certificate (accredited by Middlesex University)
- Completing the iST Practitioner's Diploma (accredited by Middlesex University)
- Completing iST4070 1:1 Psychotherapeutic Preparation Course
- Regularly attending clinical supervision, staff dynamics groups, treatment meetings/case discussions and any other groups that are needed at any given time as a way of improving practice in line with the UKCP C-CAP requirements
- Demonstrating their ability to engage in reflective practice through maintaining an individual clinical reflective log, monitored by their supervisor.

Experienced staff may study towards a Masters (MSc) should they wish to do so and if they are nominated by the Community Director. Through this pathway, staff are able to become accredited as Child Psychotherapists.

Potential supervisors complete an additional supervision module as part of the iST training programme to appropriately supervise trainees.

### **Access to resources to meet training needs**

Staff working towards accreditation as psychotherapeutic counsellors have access to a range of resources to support their studies, e.g. relevant books and papers on site, online resources through Middlesex University and a community-based course tutor.

### Mandatory Training

All core training is overseen by the Assistant Director Statutory Compliance and tailored to our specific needs. Bespoke, face-to-face training in groups is our preferred approach in the areas of safeguarding, equality and diversity and exploitation although online sessions with a suitable provider can be arranged when necessary. Where there is a smaller number of staff in need of a specific training, an appropriate externally-delivered course will be sourced, either locally or online.

If a staff member feels that they and/or colleagues would benefit from additional training that is not already on offer, the Leadership Team will consider and support any appropriate initiatives.

~~Childhood First has a commitment to in-depth staff training. We have developed a work-based training programme in partnership with the Tavistock Clinic and the School of Social Science at Middlesex University.~~

~~This programme together with our Integrated Systemic Therapy underpins our care and treatment and the professional development of the staff. The training requires staff to understand and articulate the links between theory and practice in the context of their day-to-day work with young people, with one another and the outside world. Initially all staff undertake the iST Foundation course and IST Certificate, which has been agreed by the regulator as equivalent to the mandatory Diploma 3.~~

~~The aim of the Integrated Systemic Therapy (iST) programmes is to provide a practice-based training for professionals caring for children and young people with complex emotional and psychological needs. iST training is professionally accredited by United Kingdom Council for Psychotherapy (UKCP) via the College of Child and Adolescent Psychotherapies (C-CAP) and academically accredited by Middlesex University. Childhood First received formal approval with UKCP in 2015 becoming registered as a Training Organisation. Staff who have successfully completed the training are registered as UKCP-accredited child psychotherapeutic counsellors while staff who are currently working towards accreditation will take five years post-probation to reach this stage.~~

~~The programmes are particularly aimed at group-based care settings (e.g. residential therapeutic communities, residential children's homes and special schools and smaller units) where the assumption is that the core of staff training and development needs to be practice-based, with the essential aims of developing the individual, the team and organisational practice.~~



~~The main purpose of the Certificate, Diploma and Practitioner's Diploma is workforce development for the staff who work within our own therapeutic communities. This training provides the basis for the staff to learn the theoretical and practical application of Childhood First's unique iST model, within which the whole organisation works.~~

We also encourage staff to undertake further training which benefits both the individual and the community enhancing our overall practice.

## 23 Organisational Structure

At the time of review, there are **33** members of staff at Merrywood House comprising:

### Leadership Team

Community Director (Registered Manager)

Deputy Director

3 x assistant directors

### Senior Care Team

3 x team leaders

3 x deputy team leaders

### Care Team

13 x therapeutic care workers

1 x waking night therapeutic care staff member

### Admin Team

1 x placement & family support worker

2 x part-time receptionist/administrators

1 x part-time administrator

### Ancillary Team

1 x part-time cleaner

1 x maintenance assistant

1 x part-time child & adolescent therapist

1 x course tutor

### **Leadership Team**

~~1 Director (Registered Manager)~~

~~1 Deputy Director~~

~~3 Assistant Directors~~

### **Care Staff**

~~3 Team Leaders~~

~~4 Deputy Team Leaders (1 on maternity leave)~~

~~12 Therapeutic Care Workers~~

~~1 Waking Night Staff~~

### **Non-Care Staff**

~~1 Placement & Family Support Worker~~

- ~~1 Child & Adolescent Therapist (part-time)~~
- ~~1 Clinical Case Administrator~~
- ~~1 Statutory Compliance Administrator (part-time)~~
- ~~2 Receptionist/Administrator (p/t)~~
- ~~1 Maintenance Assistant~~
- ~~1 Cleaner (p/t)~~

Team leaders head up three teams of 7 therapeutic staff who together provide a 24-hour, 365-day residential rota based on a repeating three-week pattern. The number of staff on shift at any time is adjusted according to need.

Night-time cover is provided by two members of the day shift who sleep-in. We also have a waking night staff member who works with a colleague from the day shift for a number of shifts each month. The waking night staff member arrives at 9pm and leaves at 9am the following day. Staff in the house are night have access to support from the management on-call phone.

Annual leave is planned up to 3 months in advance so that rotas can be predictable.