

Cedar House School - Residential Statement of Purpose

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The Aims and Objectives of Cedar House School's Residential Provision

Cedar House School specialises in supporting a diverse group of pupils exhibiting Social, Emotional and Mental Health (SEMH) needs, alongside a range of other associated conditions between the ages of 7 to 18 years. In order to cater specifically for their needs, the school employs a therapy team consisting of Speech and Language Therapists, Occupational Therapists, Play Therapists, Creative Therapists, Assistant Psychologist and a Forensic Psychologist.

Cedar House School's residential provision continues to be judged as Outstanding in all areas from our Ofsted inspection in February 2025.

Our residential ethos is to create a caring, supportive, safe and secure learning environment, in which young people are encouraged to develop their full potential and to foster resilience. We aim to treat each young person as an individual, recognising their different needs and celebrating their strengths. We strive to develop all the young people's capabilities whilst promoting their self-worth and self-esteem.

We are committed to providing a safe, nurturing, caring and stimulating environment for young people, where issues and concerns affecting both their past and their futures can be positively addressed and supported. Working in partnership with each young person, their families and other professionals, we endeavour to enhance each young person's achievement possibilities, raise levels of self-confidence and self-belief and create opportunities to learn, develop and achieve.

Whilst in Cedar House School's Residential Provision we will actively encourage the young people to develop friendships with peers and adults, and to continue the development of independence at a level and pace in accordance with their understanding and ability.

Location and Accommodation

Cedar House School's Residential Provision is situated within the main school site. The school sits in its own grounds in Lower Bentham in the Craven District of North Yorkshire. We provide a high-quality living experience within a welcoming and warm homely environment.



There is access to a variety of local activities such as a local clubs, trampolining, parks, horse riding, cinemas, lazer quest, bowling and leisure centres including swimming pools and gyms. Opportunities are provided for young people to access local facilities in either a supported, semi-independent or independent basis.

The school's residential accommodation consists of three homes located on the main school site for pupil's during term time only.



Our first residential home Bowland can accommodate up to five young people. All our young people have individual bedrooms with en-suite facilities. There is a lounge, dining and kitchen area, and a second lounge.



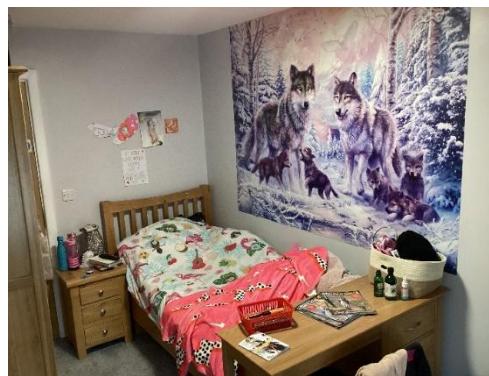
Our second residential home Lowgate can accommodate up to five young people. All our young people have individual bedrooms with en-suite facilities. There is a lounge, dining and kitchen area, a games room, a playroom and a communal bathroom.



Our third residential home Westmorland can accommodate up to eight young people. All our young people have individual bedrooms with en-suite facilities. There is a lounge, dining and kitchen area, a relaxing room and a communal bathroom.



The wishes and feelings of the young people, as well as their compatibility, are taken into account in deciding where each young person lives. All pupils are encouraged to personalise their own rooms and to develop respect for privacy and comfort rights of themselves and other members of the home. The young people are given a forum during weekly meetings to discuss any issues they may have, activities they wish to undertake and what they would like for their meals. Keyworker sessions take place with all young people, giving them opportunity to discuss how they are feeling, their views and wishes.



All bedrooms are equipped with a television and internet access. The bedrooms are all personalised and furnished to a high standard, taking into account the needs and wishes of the young people providing space and facility for private study.

All children and young people who are resident have individual bedrooms that they can lock if they wish to ensure privacy and security. All young people have their own key but for safety reasons staff can gain access to bedrooms if necessary. All young people have a choice in the layout and decoration in each bedroom.

Externally the grounds of the school are accessible to all young people who stay residentially. Young people can access the garden, Cruyff court, sports hall, playing field, art room and beauty salon if they wish to.

The design of the residential homes allows for privacy and promotes independence opportunities for young people that meet their social, emotional, and personal development needs.

Visitors are welcome at most times during the day and evening, but preferably not when young people should be at school or late at night. We provide children with appropriate privacy for visits involving family, friends, social worker and other supporting partnership staff.



How to find us

From M6 Northbound:

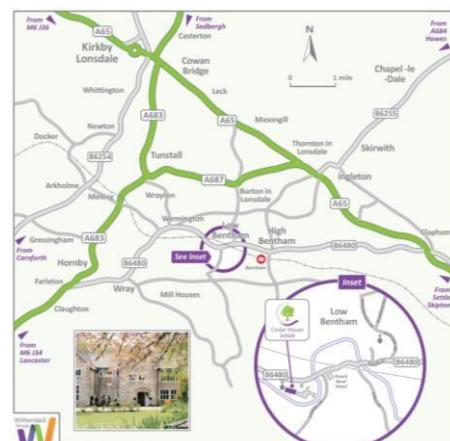
- Leave the M6 at junction 34, at the end of the slip road turn left onto the A683 towards Kirkby Lonsdale.
- Continue on the A683 for 6 miles and turn right onto the B6480 towards Wray and Wennington.
- Pass through Wray and Wennington and continue for a further 2 miles, as you arrive in Low Bentham you will pass a church on the right.
- You will see our entrance shortly after on the right-hand side.

From M6 Southbound/Furness Area:

- Leave the M6 at junction 36 signposted Skipton, Kirkby Lonsdale A65, Barrow A590.
- At the roundabout at the end of the slip road take the first exit onto the A65.
- Continue for 5 ½ miles towards Kirkby Lonsdale, go ahead at the roundabout.
- Pass over the River Lune, turn right onto the A683 towards Lancaster.
- Continue through Nether Burrow and Tunstall.
- At the junction with the A687 continue ahead onto the A687 towards Skipton & Settle.
- Continue for 3 miles into Burton in Lonsdale.
- Continue past a church on the right and then take the next right onto Chapel Lane.
- Follow this road to Low Bentham and turn right onto the B6480 Main Street.
- Pass under a railway bridge, then over a river bridge.
- You will see our entrance shortly after on the left-hand side.

By Train:

- Bentham is the nearest station.
- It receives services between Morecambe and Leeds.
- We are an 8-minute taxi ride from the station.



Caring for Children

The Witherslack Group is committed to working in partnership with young people, Parents/Carers, Social Workers and placing authorities to best meet the needs of our young people. Every young person at Cedar House School Residential Provision House has a 'Key Worker' to ensure that the Individual Care Planning is effective, targeted and regularly reviewed.

The Witherslack Group maintains a very high view of young people and this is rooted in its philosophical base of 'Resilience Theory', which itself holds to the principle that—

The individual has a combination of personal characteristics and skills that allow them to function beyond what would be expected in the light of that person's vulnerability or exposure to adversities.

It holds to a view of people that is positive and which has a high expectation of the individual's ability to change.

Ethos and Culture

The ethos and culture of Cedar House School Residential Provision is based on person centred principles which promote the development of meaningful relationships between staff and young people. Young people are at the centre of the work we do in trying to provide the most positive residential and educational experiences possible. These are based on the core values of mutual respect and good parenting, respectful to the values of privacy, dignity, independence, choice, rights and fulfilment.

All staff at Cedar House Residential Provision have an active awareness of each young person's racial, cultural, religious and dietary needs, and all children and young people will receive sensitivity in practice, especially when dealing with personal issues. We aim to equip young people with the knowledge and skills needed to make informed choices. We will support young people to develop these skills within a nurturing and appropriately structured environment.

"Changing Lives, Building Futures"

Cedar House is committed to the following principles:

- To respect the value of all individual pupils and staff
- To provide the highest standards of care and education
- To ensure safety, security and opportunities for success

We aspire to be an example of best practice for children locally, regionally and nationally. We have a clear view of our purpose and practice and this is articulated in the theoretical and philosophical basis of our work. The ethos of the school is geared towards providing a safe, secure and caring environment within which personal growth and development is promoted. Opportunities to experience success, learn from mistakes and build trusting relationships serve to enhance confidence and self-esteem.

Achieving Positive Outcomes

Better outcomes are achieved for our young people, where there is access to responsive support designed to increase resilience and reduce problems. Good care planning and case management/tracking is fundamental to improve outcomes, in that it facilitates an appropriate response of services and decision-making processes to the individual needs of each child or young person.

As a Care team we attend all meetings on our young people, we internally hold ITAC (Internal Team Around the Child) Meeting's and Child Focus Meeting's to ensure as a staff team we identify areas of strength and development of the young people and provide a consistent approach.

For children and young people in our care, having some control over their lives is often extremely important. Working with young people in an inclusive, child friendly way to develop goals or define their own outcomes can help promote a sense of what the future might hold and how we reach it.

The homes approach to achieving positive outcomes for the young people we care for include:

- Involving children in discussions about their needs and their future
- Helping them to contribute to care plans and reviews, ensuring their wishes are always considered and where possible addressed
- Giving clear information, making sure that young people know about – the reasons for staying residential, their rights while they are with us, future plans and how they can influence these.
- Encouraging young people to make choices, state preferences and define outcomes for themselves and respecting these choices and preferences.

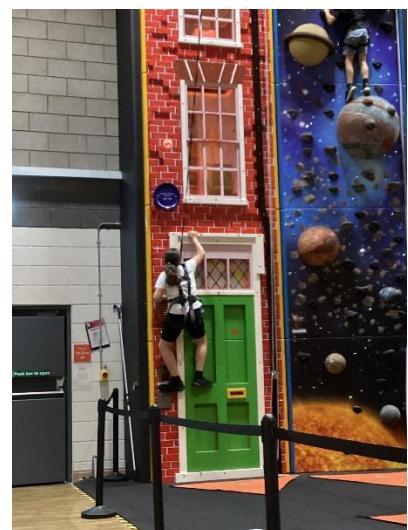
The purpose of providing young people with personalised packages of support, information, advice, guidance and learning and development opportunities is to improve their life-chances.

Social, Sporting and Cultural Activities

All children in the Residential Provision are given the opportunity to actively engage in and influence the planning and delivery of a wide variety of leisure activities which include holidays and day trips and access appropriate opportunities which involve young people recognising and managing calculated risk.

Young people are encouraged and supported in their participation in a wide range of social, recreational, learning and cultural activities. Staff management of these activities are based on their knowledge of a young person's developmental capacity and independent skills, some young people will be able to access activities independently or semi-independently whereas others may require more staff support. Staff will assess each young person when they arrive with us and identify areas to improve skills and build a complete social development profile.

As well as supporting existing hobbies, we offer young people the opportunity to discover and develop new individual interests and hobbies which allows for the development of wider social networks. Many young people join local youth groups or community-based sports activities with some young people sometimes having part-time jobs. We understand that it is important that young people feel that they are part of the wider community and that they also have something positive to look forward to.



Each young person in Cedar House's Residential provision will work on AQA units, during their time with us. These are designed around social skills. They are targeted to be age appropriate and based on adding to their life skills. We actively encourage all young people to help identify what they want to work on, in order to help them have ownership.

Placement Plans

All young people have a comprehensive placement plan which includes: the day-to-day routines, contact arrangements, family details, education arrangements, health care, consents for medical treatment, risk assessments, PEP, identity, social development profiles, social and leisure activities which is reviewed on a minimum half termly basis or as circumstances dictate.

A review of arrangements will be held within 12 weeks of placement in line with a school post admission review. It is the responsibility of the keyworker, under the guidance of the head of care, to monitor and ensure that the requirements of the care plan are implemented in the day-to-day care of each young person.

Religious and Cultural Ethos

The religious and spiritual needs of young people is central to their identity and welfare and our Residential Provision is proactive in supporting them in these aspects. We are sensitive and respectful of the religious and cultural needs of all the young people and their families, and welcome information prior to admission concerning any specific requirements. Young people will be supported in any religious observance of their choice as well as work aimed at increasing young people's awareness, understanding and acceptance of different faiths. Young people are actively encouraged to maintain cultural links, and this is supported by a culture in the school which recognises individuality and celebrates diversity. We will support a young person to attend a service or receive instruction in their chosen faith as well as supporting them in other aspects of religious observance such as diet and dress for example.

Contact between Children, Families, Relatives and Friends

Some of our young people reside at Cedar House from Monday to Friday, going home at weekends and others on alternate weekends. Some young people reside at Cedar House throughout the half term however, when this is the case, we do encourage the young people to have one weekend home during this period to maintain contact with their families as it can often seem like a long time. All our young people go home for school holidays as the residential provision closes throughout this period.

Children and young people who stay at Cedar House's Residential Provision will be actively supported in maintaining contact with parents, family and significant others throughout the week. All Staff actively promote family contact, as appropriate and agreed in the placement plan for each young person. Contact is supported in a variety of ways including visits, telephone contact, social media (where appropriate), email, iTAC meetings and reviews.

Consultation with Young People

We believe that Cedar House's Residential Provision functions best and the young people living here are happiest when they are routinely consulted about events, actions and decision which affect them. Consequently, the home has in place a number of formal and informal systems designed to involve young people in active decision making. All children accommodated at Cedar House Residential Provision will be made aware of their rights and how they access independent advocacy services, Children's Rights Services and Ofsted.

All children and young people at Cedar House's Residential Provision are actively encouraged and supported to share and influence the day-to-day routines and practices within the home through a variety of means, including daily discussions, young person's meetings, menu and activity planning and regular planned key worker sessions. Other more practical examples are the purchasing and choices regarding resources, furnishings and decor in the home. Young people are encouraged to be involved in discussion and decision making about developments within the home and actively contribute to the residential development plan.

Consultation with young people involves adults working with children and young people to ensure that their views are heard and valued in the taking of decisions which affect them and that they are supported in making a positive contribution to their home.

Participation and involvement from young people, their families or carers, friends and support staff (i.e. social workers) are embedded into the heart of our services for care and education within the Witherslack Group. We feel young people's involvement (and other key individuals) are crucial to them taking ownership, developing self-esteem and establishing the wider skills they will need to succeed in life.

Young people are included and share responsibility for decision-making, improvements and new initiatives within the home. We encourage young people to be involved in person-centred and democratic processes in many areas including; menus, activities, holidays, Child Looked After Reviews, 1-1 key worker sessions and Integrated Team Around the Family meetings. Children are regularly consulted about staff and their approach in the manner of "the voice of the young person".

Equal Opportunities, Anti – Discriminatory Practice and Children's Rights

Cedar House's Residential Provision has an equal opportunities policy which aims to ensure that no job applicant, employee, young person or prospective young person is discriminated against whether directly or indirectly on the grounds of age, gender, attainment, special educational needs, ethnicity or cultural background. Cedar House's Residential Provision operates a 'zero tolerance' approach towards discrimination and extremism in all its forms.

We believe that all young people have the right to be listened to, to have their views respected and to be able to feel safe, free from abuse, fear or oppression. A key focus of life at Cedar House's Residential Provision is in helping young people to gain a greater understanding not just of themselves, but also of other young people, adults and the wider community. With rights come responsibilities and it is important that young people learn the value not only their own rights, but also the rights of others.

Our aims are:

- To ensure young person's opinions and those of their families or significant others, are sought over key decisions which are likely to affect their daily life and their future and that feedback will be given after consultations,
- To balance properly young peoples' rights and responsibilities,
- To raise awareness of the relevant provisions contained within the European Convention on Human Rights as they apply to UK law (as contained within the Human Rights Act 1998),
- To establish our position that as an agency acting on behalf of Local Authorities (by way of our core function to provide care for their children) we are cognisant of our responsibilities and liabilities as a 'public authority' and will act in accordance with the Convention Rights,
- Young people will be encouraged and supported to make decisions about their lives and to influence the way the home is run,
- Young peoples' privacy will be respected and information about them will be confidentially handled,
- Young people's complaints will be addressed without delay and young person will be kept informed of progress in their consideration,

- Guidance and training on consulting with and involving young people, their families and significant others will be provided for staff,
- The religious, racial, cultural and linguistic backgrounds of young people and their families will be taken into account by staff who will be encouraged to ask for advice and assistance when necessary. Staff will ascertain and take into account the views and opinions of young people, their families and significant others. Feedback will be provided following consultations. The views and opinions of young people on all matters affecting them including day to day matters and major events will be ascertained and not taken for granted,
- Each young person, as far as is practicable, will be able to attend the services of, receive instruction in and observe any requirement of (including dress, diet or otherwise) of their religious persuasion.

Referral and Admissions Process

Initial enquiries and informal visits are welcome by appointment. Formal application for placement is made through the young person's Local Authority. Applications should be accompanied by their Education Health Care Plan along with school and social reports and any other professional reports.

Cedar House Residential Provision caters for young people who have complex needs and maybe experiencing a range of difficulties including:

- Social, Emotional, Mental Health needs,
- Autistic Spectrum conditions,
- Communication difficulties,
- Attachment disorders,
- Asperger's Syndrome,
- Developmental delay,
- Dyspraxia,
- Associated Behavioural difficulties,
- ADHD.

It is envisaged that the young people will be in the home for as long as they need to. This is dependent on funding and continual access to education within Cedar House.

The placement is needed in order to undertake the therapeutic work to help the young person develop a sense of personal security and identity, with consequent emotional and social development. There are high numbers of staff available to support and encourage young people to develop significant positive attachment relationships with staff and hopefully with each other in order to provide emotional building blocks for personal and social development.

Compatibility and Matching

At Cedar House's Residential Provision all possible care is taken to ensure that all the young people accommodated meet the criteria of admission, placement suitability and stability are paramount. In respect of all admissions, the assessment and approval process will always consider the needs of any new young person concerned, and the likely effects of his/her admission upon the existing group of young people accommodated.

If initial assessment of all the available documentation indicates that Cedar House School and Residential Provision may be able to meet the needs of a young person, then an initial planning meeting is usually held. This affords the parent/carers, Social Worker and Local Authority representatives the opportunity to visit the school and home. If all parties agree on the appropriateness of the placement, then an agreement will be reached as how to involve the young person in the process.

The assessment and admissions process will, in every case, be tailored to meet individual need. Some admissions will involve a number of visits, whereas other transitions will occur much more quickly. The needs of the young person will always determine the speed and nature of the admissions process. The young person will also receive a Pupil Guide which is a child friendly overview of the residential provision and letters/cards/pictures from the staff and young people they will be living with.

Whilst our preferred option is always a planned transition this may not always be possible and there may be circumstances where the young person may be admitted to the home within a short timescale. This would usually be in exceptional circumstance such as, the young person already been known the Witherslack Group or in circumstances where information received, from the initial referral requests would suggest, the home can meet the needs of the young person from the information that is shared, and the home is confident that there are no emerging risks to other young people in placement.

If these circumstances do arise, and if the home has not been able to meet with the young person due to the stresses it may cause them. The home will always ensure that a pre-admission meeting is held with all relevant professionals involved with the young person, are held prior to admission in order to gather all relevant care and educational needs for the young person, which will form part of the pre-admission risk assessment of the young person.

The key propose of a professional pre-admission meeting is to determine the current needs, behaviours and possible risks the young person been admitted to the home / school. It will also allow the Head Teacher and Head of Care to risk assess the young person's needs, against the needs of other young people in placement, and to record how the home will support the young person's current presenting needs.

In the pre-admission assessment, the Head of Care will ensure staff have the relevant experience and training in place, to support the young person's current presenting needs.

An interim placement review meeting takes place approximately 12 weeks following a young person's admission to the school. This meeting will be the forum to confirm a permanent placement. The 12-week interim period of placement allows for settling and familiarisation by the young person and for more in-depth assessment of abilities, needs and provision arrangements by staff. It is essential that this period of time is provided so that all parties involved recognise the appropriate nature of our Residential provision in each individual case.

Making a Complaint

The Witherslack Group recognises that all children need to feel able to complain, know how to do so and be supported when they feel unhappy with any aspect of living in a children's home. At Cedar House Residential Provision complaints are dealt with as soon as is practically possible by the most appropriate person.

All our residential young people are made aware of clear information about how to raise a concern both formally and informally. They receive a young person's guide prior to admission to the home and this has details of how to make a complaint. The young people also complete a pupil induction within two weeks of their admission and this reviews the complaint process.

All young people have access to complaint documentation. Most concerns or worries can usually be resolved by discussing issues with the individuals concerned. However, if the complaint cannot be resolved in this manner the home has a formal complaints procedure.

Our children and young people may choose to complain to anyone of the following people: key worker, other staff member, peer, parents/carers, social workers etc.

There are several other people or organisations independent of the home that may contacted; these include

Ofsted (general helpline telephone 0300 123 1231), the Children's Commissioner / Help at Hand (0800 528 0731) or Independent Reviewing Officers, Social Workers, Independent Visitor or our Independent Person.

Safeguarding

At Cedar House School the welfare of young people is paramount. We are committed to maintaining a safe, nurturing and caring environment where children and young people can safely build friendships; develop social skills, self-confidence and self-esteem.

Cedar House School has a Child Protection policy and a robust training regime, which all staff receive. Cedar House School has a Designated Safeguarding Lead (Karen Batchelor) and 4 Deputy Designated Safeguarding Leads (Lauren Draper, Michael Tracey, Kerry Cheshire and Jonathan Taylor). All staff are clear on what action they are to take to protect a young person who is at risk, or potentially at risk. Initially concerns would be directed through the Designated Safeguarding Lead or Deputy Designated Safeguarding Leads, however, should the need arise staff are aware of how to make a referral to the Local Safeguarding Children's Partnership if this is considered appropriate.

Allegations are reported to the Head Teacher and all allegations that meet the threshold criteria are reported to the Local Area Designated Officer and Parents/Carers (where appropriate). The home follows North Yorkshire Local Safeguarding Children Partnership procedures. Safeguarding procedures are detailed in our policy and procedures.

Bullying is recognised an inherent risk in all group living experiences, and it is acknowledged there is always the potential for bullying and intimidation by other children and young people. At Cedar House Residential Provision bullying is taken very seriously and a number of measures are in place to manage these incidents. Staff are trained in recognising the signs of bullying, and young people are continually encouraged to engage in open dialogue with staff in an environment where they feel able to share any concerns they may have.

There is also the formal complaints procedure for children and young people to access, and the home has an antibullying policy which is known and understood by all staff and young people. Regular opportunities are taken for young people and staff to discuss bullying in all its forms and the policy and its effective implementation is monitored by senior staff in the home.

All children and young people at Cedar Houses Residential Provision are actively encouraged to be involved in the interview process for all new staff and the home complies with current safer recruitment guidance. All newly appointed staff at Cedar House's Residential Provision are subject to interview and three satisfactory references and DBS at enhanced level are sought prior to any employment offer being made.

The safety of the buildings and wider environments is maintained with regular safety checks, risk assessments and support provided by the Witherslack Group Health & Safety and Environment Services.

Missing From Care / Education

Cedar House School has guidance which details action to be taken whenever young people are missing from care. The timescale for action taken by staff in response to such incidents will be determined by a number of factors including:

Guidance already agreed and incorporated within the young person's placement plan; the age, maturity and vulnerability of the young person; the time of day and weather conditions; previous behaviour patterns and the emotional state of the young person; the level of perceived risk indicated on the individual risk assessment.

The responses are detailed in each young person's individual risk assessment and placement plan.

Preventative Measures

An inter-agency approach to care planning, including an assessment of the likely risk of going missing, will be necessary from the point which young people are first looked after within the home. In particular, social workers and members of the residential care staff need to:

Be aware of the kinds of immediate and underlying reasons that may prompt young people to go missing, have a thorough knowledge of young people's past histories of going missing, whether from home or substitute care, keep accurate records, plan ahead to manage situations in which young people may be vulnerable to going missing.

Planning and Prevention

Each young person will have a dedicated key worker. Initially the key worker will focus on developing trust with a young person and building a flexible, supportive and protective relationship. There are also opportunities for young people to access our therapeutic services. It is important for a young person that they feel listened to as 'adults' as young people often feel a sense of powerlessness and that they are not listened to.

High quality care, which meets the diverse needs of young people and provides greater structure and stability in the young people's daily lives, provide a context in which going missing becomes less likely. We will do this by linking the assessment of young people's needs and progress in all areas of their lives to the young person's care planning and review process. Detailed care plans also provide the opportunity to place the risk of going missing in the wider context of young people's lives.

The young people will have regular and planned access to a trusted adult outside the home - for example, a family member, the young person's Social Worker, an Independent Person or a Children's Advocate.

User friendly complaints procedures are in place which will address both informal as well as formal complaints. A pattern of minor complaints may indicate more deep-seated problems in the management and culture of the Residential Provision. By the promotion of open communication about 'minor' complaints are unlikely to be responsive to 'major' ones.

For those young people who have gone missing in the past, understanding past patterns of absence can help care staff predict the circumstances in which future incidents might potentially occur. Strategies that link knowledge of young people's past patterns with future planning will depend upon good standards of record keeping. Evidence of past incidents will form part of the young person's risk assessment and will be regularly reviewed.

The young person's placement plan and review process will pay proper attention to the potential risk that a young person may go missing so that additional agreed preventive measures can be in place.

For example, they may

- arrange to keep a close eye on a young person before and after a difficult meeting to help them feel secure and reassured,
- spend time with a young person after a difficult contact with a parent,
- respond immediately to incidents of conflict among young people,
- plan a consistent approach by all members of the staff team to manage a particular young person or to respond to a particular behaviour,
- Clear details in a young person's placement plan regarding their time in the community.

Such strategies involved organising individual quality time with young people and developing their interests in sports, cultural and social activities. From the point at which young people enter a placement, identification of their educational and leisure interests will form part of the initial assessment process. The promotion of outside interests can then be built into the young person's care planning and review process. Not only might this limit the risk of them going missing but it would also broaden the range of social relationships available to them.

In most circumstances staff will conduct a local search for the missing young person(s). Staff will conduct a personal risk assessment before engaging in such activities to assess the level of risk they may put themselves in. When young people are missing from care the staff will inform the Head Teacher, Head of Care, Police, parents (where appropriate), placing authority and the Regional Director.

On the young person's return, his/her general welfare and medical condition should be assessed and discussed immediately for example when the young person has last eaten, slept, any injuries sustained etc. and an offer made to arrange medical attention.

On return, staff will meet the young person's immediate physical and emotional needs. The welcome home is sensitive and followed up by listening to the reasons why the young person has gone missing from care (when the young person is ready) and attempting to act upon this information to resolve any issues.

Staff will record all facts associated with the absence on a Incident Report. Following any incidents of missing from care, the young person's Social Worker (if applicable) will be contacted and invited to visit the young person to discuss the period of missing from care with someone independent of the home. Staff are aware of their powers in relation to preventing a young person from leaving without permission and these are regularly reviewed in staff meetings, induction and development sessions.

Young people who are at significant risk when missing may have specific programmes designed to restrict or reduce such incidents. These measures will have been agreed in advance with the young person, parents (if appropriate) and the placing authority. All such programmes will be recorded in a written format and will be included with the young person's Placement Plan.

Individuality and Positive Group Living

There is always a possibility that in a home which accommodates multiple young people that individuality and person-centred practice suffers in the desire for efficiency and ease of management. Cedar House Residential Provision House is committed to the provision of the highest quality care and recognises the importance of individuality, diversity and difference. To guard against institutionalisation the staff team and young people living in the home regularly review care practice to ensure that it accurately reflects the home's Statement of Purpose and the needs of the young people who live there.

Many of the young people referred to Cedar House's residential provision may have poorly developed social and life skills. These are often typified by negative peer relationships and an inability, or unwillingness to share, compromise or display tolerance towards others. Those who are under-skilled socially often find themselves in a cycle of negativity and rejection. Not only are they poorly skilled, but by virtue of their skills deficit they can often find themselves feeling/being socially isolated leading to a lack of social learning opportunities where peer modelling, reinforcement and recognition can take place.

Through the delivery of structured social skills programmes the use of positive reinforcement and rewards for prosocial behaviour means that these needs can be addressed.

Education

The Witherslack Group recognises that education, in all of its forms, is the cornerstone of personal growth and development. All our children and young people are actively encouraged to engage in the formal and informal educational opportunities provided. Young people living at Cedar House Residential Provision will attend Cedar House School which is on the same site.

As such pupils are accepted with:

- Social, Emotional, Mental Health needs
- Speech, Language and Communication difficulties
- ASC
- Developmental delay requiring a highly modified curriculum
- Dyspraxia
- Behavioural difficulties
- ADHD
- Attachment disorders

The staff from Cedar House's residential provision work very closely with staff from the school to promote the educational opportunities and attainment of all our children and young people. Staff are fully conversant with the young person's Individual Education Plan and maintain daily communication with staff from the school. Young people are supported in accessing independent learning opportunities within the home that complements their learning. Children are also encouraged to attend after school clubs/groups to further develop their skills, interests, social contacts and independence. Staff in the home promote a positive home learning environment, and this is supported by generous educational resources. All IT in the home is 'filtered' to ensure that the online experience of young people is both enjoyable and appropriately safeguarded.

Residential staff meet regularly with key staff in the school to promote and facilitate communication and information sharing, leading to a holistic approach towards the young people's educational opportunities and attainment.

Health

Each young person also has a clear and comprehensive written Health Plan (within their Placement Plan) which details: medical history; any necessary preventive measures, allergies or known adverse reactions to medication; dental health needs; health monitoring required and the involvement of parents/carers in the young person's health care. We also have a Nurse in School who is on site four days a week.

Staff at Cedar House's residential provision are aware of the important role they have in promoting an awareness of health issues and promoting a healthy lifestyle. Each young person is provided with guidance, advice and support in accordance with their age, needs, culture and wishes in relation to health and social issues. A combined approach of individual and group work is used to promote discussion to support children's knowledge and understanding of their own physical and emotional health and well-being. Children with a particular health problem or a disability including physical or sensory impairment or learning disabilities are provided with the appropriate support to effectively meet their needs.

We will actively promote good healthcare by supporting young people to make the right choices as well as through the provision of information, education and guidance on health issues including sexual health. We will always attempt to seek the approval of those with parental responsibility (for those under 16) when dealing with issues which arise for each child's developing sexual awareness. This will involve the provision of age-appropriate education and guidance relating to sexual behaviour, health and well-being.

To deal with all routine treatments we access local doctors, dentists, and opticians with which all our children and young people are registered. Staff will record all details of such visits on individual placement plans,

including treatment and medication details. Some parents may choose to keep their child registered in their home area. Where this is the case, we can access local health services if needed.

In support of our healthy lifestyle objective smoking/vaping is not permitted at Cedar House's Residential Provision, instead we support young people with smoking/vaping cessation programme.

Therapeutic Services at Cedar House

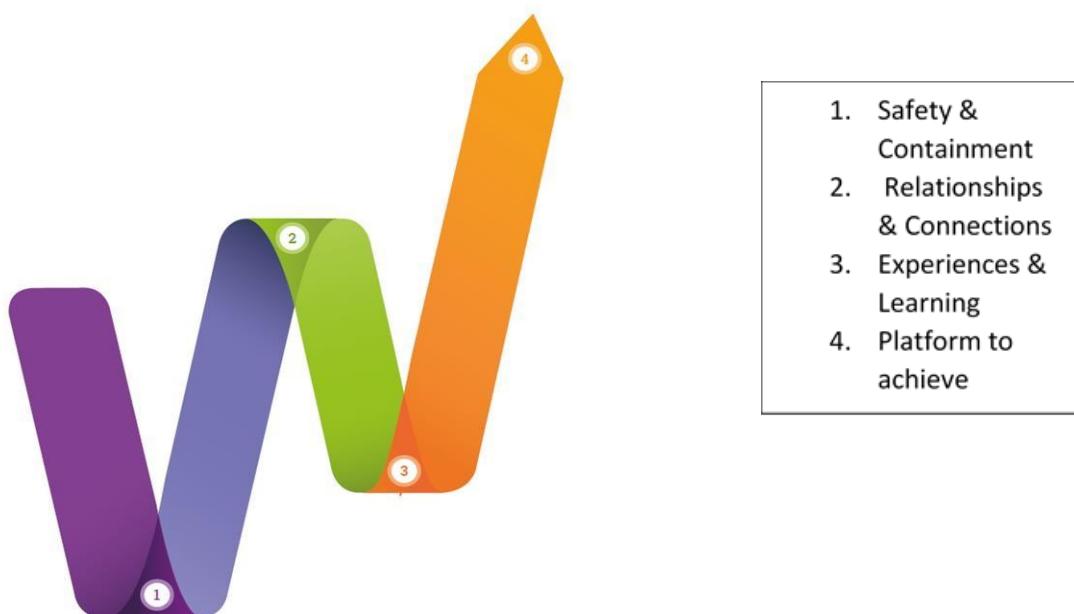
The Therapeutic Model:

The therapeutic model within the Witherslack group is informed by evidenced based theory and recognised best practice aimed at supporting children and young people with Developmental Trauma, Neuro-developmental Conditions and Special Educational Needs, to live healthy and happy lives, establish meaningful relationships and achieve their full potential.

Research has established that children and young people's brains develop in a bottom up, sequential process. This progresses from sensory motor input and needs driven survival behaviour, through attachment and emotional development, to the ability to think, learn, to use language effectively and to inhibit impulses. Many children and young people who have experienced trauma, or who have Autism or other Special Educational Needs can become 'stuck' in a developmental stage, often the sensory stage, which makes it difficult for them to engage in formal learning or to express their emotions through language. Regardless of the initial cause of this difficulty, all of these children and young people will benefit from approaches which support bottom-up brain development.

The Witherslack Group Therapeutic Model is underpinned by an understanding of this neuro-sequential development combined with Complex/Developmental Trauma theory. To assess each child's individual needs we further draw upon theories and concepts of Attachment, the Internal Working Model, Child Development, the Neuro-sequential Model of early brain development, Mental Wellbeing, and Neuro-developmental Conditions.

The WG therapeutic model recognises this hierarchical development which is captured through our [Areas of Therapeutic Focus](#)



¹ Complex Trauma in Children & Adolescents Cook et al. Psychiatric Annals 35.5 May 2005

² Bowlby, J. Ainsworth, M. Crittenden, P.

³ Bowlby.

⁴ Perry, BD. 2006

Understanding how our brains develop sequentially we recognise that until our children actually ‘feel’ safe living with us they will not be able to begin to explore the possibility of developing new relationships and ultimately attachments; both being the foundations from which they will develop the ability to regulate and process their emotional worlds, and the capacity to access opportunities for learning and further development. Critical to achieving this is the establishment of a therapeutic environment, and as therapeutic practitioners we aim to do this by developing and maintaining a safe and secure base, a place of child-centred nurture, with clear reliable, predictable provision, routines, boundaries and expectations, within which our children and young people can begin to develop a ‘felt’ sense of safety.

The time and process it takes to establish safety and emotional containment for a child or young person is individual, as is their journey to developing attachments. Our embedded clinical team support us throughout this by helping us to continuously assess and understand the developmental stage and presenting behaviours of a child or young person and adapt our communication, therapeutic engagement and positive behaviour support strategies to meet their developing and ever-changing needs.

The Clinical Team:

Essential to the Witherslack Group Therapeutic Model are our Clinical Services Team who work alongside the wider multidisciplinary team to provide an integrated provision of therapeutic intervention, care and education. Each of the children’s living and learning environments are supported by a bespoke team of clinicians which includes:

Sian Atkinson, Play & Creative Arts Therapist
Angela Chadwick, Expressive Arts Therapist & Counsellor
Charlotte Wilson, Psychotherapist
Hollie Telford, Senior Psychologist
Sarah Blackshaw, Assistant Psychologist
Beth Broadley-Mundell, Assistant Psychologist
Georgina Martindale, Specialist Speech and Language Therapist
Amy Lord, Specialist Speech and Language Therapist
Helen Walker, Specialist Occupational Therapist
Deborah Horrocks, Specialist Occupational Therapist
Julie Mulliner, Therapies Assistant

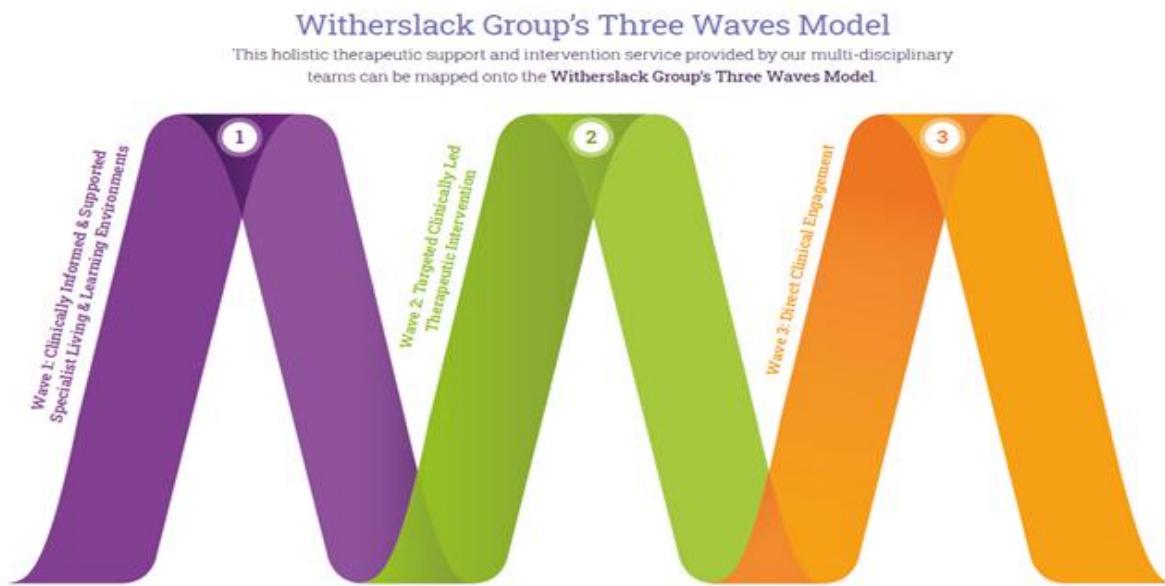
Children and the team around the child also have access to other specialist clinicians within the wider group including our Consultant Child & Adolescent Psychiatrist.

All our practising clinicians are registered practitioners with The Health and Care Professions Council or their appropriate designated regulatory bodies such as The British Association of Counselling Psychotherapists, British Association of Play Therapists, and the United Kingdom Council for Psychotherapy, and all receive clinical supervision from other senior clinicians within the group. Line management for our clinicians is provided by senior clinical colleagues and the Regional Director Clinical, who in turn is line managed by the group’s Clinical Director.

All clinicians are supported to maintain their registrations through Continuing Professional Development opportunities, many being supported by the group to develop specialisms such as Sensory Integration Therapy, Dialectical Behaviour Therapy, and Trauma Informed Communication Approaches. Clinical Governance is the responsibility of the Clinical Director who chairs the quarterly Witherslack Group Clinical Governance Board; attended by external advisors and internal Directors.

Therapeutic Provision:

The Clinical Service Teams use 'The Waves Model' of intervention to guide their practice. This means that there is shared approach to support the development and maintenance of a therapeutic environment and culture across the team informed by specialist knowledge. The model is shown below.



Wave 1: All staff support young people to create an inclusive working environment. Clinicians provide training to school staff to help them understand and meet the needs of young people with social communication difficulties, mental health difficulties and attachment difficulties.

Wave 2: Group work with staff and children directed by a clinician.

Wave 3: Individual 1-1 work delivered by a clinician to address more complex needs.

Therapeutic provision is personalised to meet the needs of each individual. All our children and young people will have an initial clinical assessment which helps us to understand and prioritise their presenting needs and inform their individual plan. The assessment will outline the focus for therapeutic work and how this will be achieved. It may also outline the need for further assessment to be undertaken at an appropriate point in the future.

All young people have access to targeted, specialist therapeutic support where needed. The nature of the therapy will be informed by their assessment and will start when the child or young person is able to access the opportunities therapy offers. Evidence suggests this is unlikely to be helpful until the child or young person has established their sense of safety, and relationships are becoming established. We also recognise that as children and young people develop their therapeutic needs may change and the clinical team keep this under review whilst the child or young person is living and learning with us. Some children and young people may receive therapeutic interventions with more than one clinician.

Our clinical team also support residential and education staff to reflect upon their own emotional responses to living and learning with our children and young people; always ensuring that they are able to stay empathic, self-regulate and therapeutically respond.

Our Clinical Team facilitate Child Focus & Reflective Practice Meetings for our children and young who live and learn with us. The meetings are usually held with residential staff and joined by education staff. The meetings ensure that

the whole team have a shared understanding of a child and young person's needs and help them to work together consistently in support of the child or young person.

Our Clinical Team also support us in assessing a child or young person's risk of harm to self or others and develop strategies to negate or manage these risks. This is achieved through multi-agency and multi-disciplinary consultation and decision making. A Self-Harm & Suicidal Intent Risk Assessment (SHSIRA) is completed for all children and young people who have or indicate intent to engage in self-harm or express suicidal ideation.

Training & Support

As well as all our residential and education staff receiving a thorough Witherslack Group Induction Programme they also undertake core training in therapeutic approaches, as well as other bespoke training where required. Staff continue their professional development through clinically led consultations, workshops and training sessions. This will include generic therapeutic content such as Therapeutic Parenting Skills, Trauma Informed Communication, Alternative Communication, Sensory Strategies, as well as training bespoke to the children & young people.

All staff receive training in the PACE Approach, enabling them to utilise this within interactions with children and young people who live and learn with us. PACE is a trauma-informed approach developed by Dr Dan Hughes as a way of helping the adult remain emotionally engaged and available to the child. Applying the PACE approach supports adults to build safe, trusting and meaningful relationships with children and young people. The adult becomes attuned to the child through applying the PACE elements within interactions (playfulness, acceptance, curiosity and empathy), whilst guiding the child through their emotions, thoughts and behaviours.

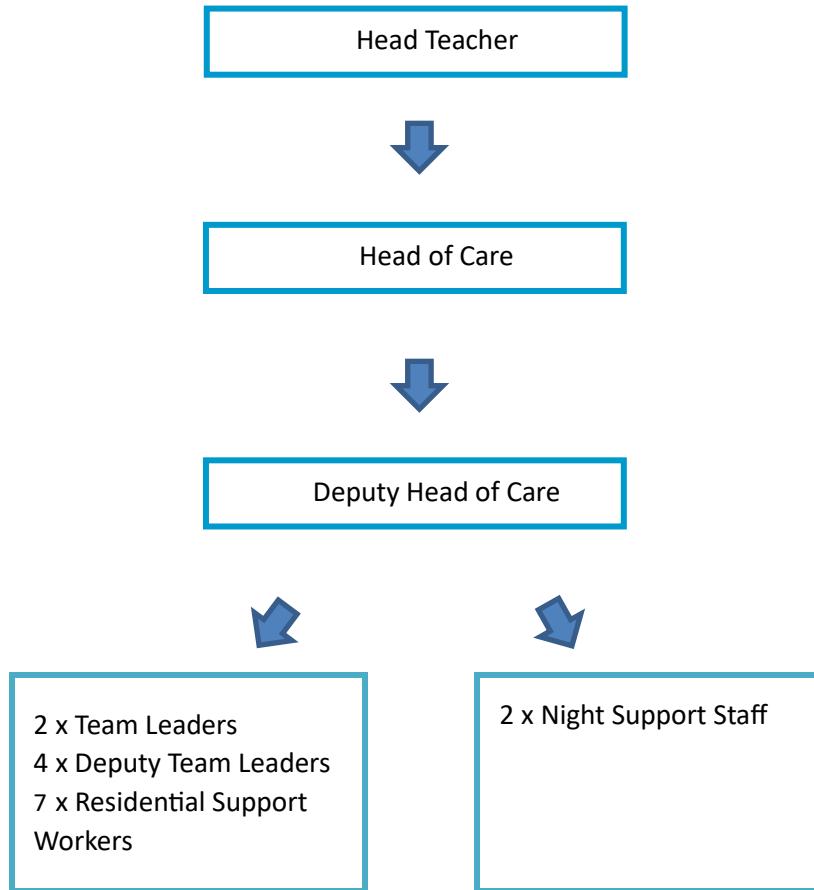
Staff Training, Development and Supervision

All residential staff employed engage in the Witherslack Group's staff annual *Progress Review* which records details of their training and professional experiences, their qualifications and their agreed development goals to facilitate the provision of high-quality care for young people. The development requirements are identified through supervision and the on-going supervision and review process.

This formalises an all-inclusive system of staff supervision, support, development and training. The Witherslack Group believes that staff support and development is a continuous process for all staff, whatever their role and responsibilities from appointment to leaving. It is a reciprocal process of mutual benefit to individuals, groups of staff and the establishment as a whole, and involves both formal and informal processes. These include using a variety of formats, including team meetings, handovers and half termly individual, direct 1-2-1 supervision with a senior member of staff which promotes reflective practice.

Training and development is not viewed as a process separate from the individual's day to day professional practice, indeed learning is most effective when individuals can identify a clear connection between theory and practice. As such the learning which occurs both informally and formally through day to day observation and feedback is as important as more traditionally based training.

Organisational Structure



Cedar House's residential care provision has a small staff team of both genders. The staff team have a vast amount of experience. The residential setting has an experienced and skilled staff team and regular reviews of the staffing profile of the home take place to ensure compatibility and skill set matching with the needs of the young people. We aim to provide a healthy balance of experience and gender to accurately reflect home contexts and promote gender identity in our young people.

All residential staff hold (or are working towards) an NVQ Level 3 in Caring for Children and Young People.

Governance

Cedar House School is a member of The Witherslack Group and as such benefits from the support afforded by an organisation which has extensive experience and a national reputation for the care and education of children and young people. There are regular meetings for Head of Care and staff that provide a forum for peer support and the dissemination of good practice.

Standard 3 visits take place each half term and carry out routine examination and scrutiny of different aspects of the home, such as health and safety, leadership and management as well as standards of care. The Head of Care is responsible for devising an action plan from any recommendations made and ensures that these are completed in a timely manner. An External Care review also takes place annually to ensure that the home is meeting all of the National Minimum Standards for Residential Special Schools.

Children's Behaviour

Staff accept that all children and young people may from time-to-time display behaviours which are outside of the norms of acceptability. To help our young people Cedar House Residential Provision House has developed a positive management of behaviour policy, systems and processes in order to not only minimise risks for children, staff and members of the community, but also enable learning through resolution.

All staff have received training in Positive Behaviour Support which focuses on distraction, diffusion and de-escalation. A major aim of the home is to help young people develop appropriate internal working models of acceptable behaviour, and that positive behaviour patterns are associated with encouragement and reward.

Any disciplinary measures used are recorded contemporaneously and signed to verify their accuracy. Young people are also encouraged to record their views as this provides ongoing social learning opportunities and improved ownership. The Head of Care regularly monitors the use of disciplinary measures seeking out trends and patterns as well as analysis of their effectiveness and makes written recording to that effect.

Many children and young people will have past or current experiences which adversely affect their understanding of accepted behaviours, and this negatively impacts on their ability to regulate their behaviour effectively. Unfortunately, this sometimes leads to times when young people may engage in behaviour that places themselves or others at risk of harm. In such cases external controls may be necessary and staff may use physical intervention as one strategy to keep the young person and others safe.

All staff are given Positive Behaviour Support training and physical intervention training (PRICE – Protecting Rights In a Caring Environment) and are re-accredited on an annual basis. PRICE is an accredited approach that promotes the least intrusive positive handling strategy, with an emphasis and preference for the use of verbal and non-verbal de-escalation strategies being used and exhausted before positive handling strategies are utilised. All staff receive PRICE training as part of their induction and this is followed up with 12 hours of annual refresher training. The focus of this training is on the promotion of a positive environment, the early recognition of warning signals, de-escalation and diffusion. All staff who successfully complete this training are assessed as competent and certified as such.

Staff receive extensive training and guidance in respect of creating a positive environment where relationships are based upon mutual trust and respect. Management techniques are reward focussed and involve a range of strategies including the use of positive reinforcement, modelling, incentives and individualised guidance and support.

The Head of Care regularly monitors the use of physical intervention to effectively analyse any trends and patterns to provide learning opportunities for staff and young people to seek to avoid the use of physical intervention wherever possible. The use of each individual young person 'PBS Plan' also assists staff and young people when dealing with future incidents.

Mechanical or Electronic Means of Surveillance

Within the residential provision, we have a door sensor system on individual bedroom doors. The use of them is subject to risk assessment and we have the functionality to choose which bedrooms require activation. If activated, when a bedroom door is opened, a silent alert is sent to the waking night staff alerting them to the need for additional support by a child. The door sensor system is only set once children go to bed and is deactivated each morning.

Children are informed on the reasons for its use and the use of this system is regularly reviewed to ensure the on-going welfare and safety of our children.

Understanding why we use door sensors:

The Witherslack Group uses door sensors to ensure the holistic wellbeing and safeguarding of all children. We recognise that sometimes a child's bedroom is a place where they have not felt safe and it is imperative that when they live with us, they do. When children first move into a residential environment, we know it can be worrying and they do not know the other children, or the staff. We want children to be able to let us know if they need to speak to a staff member and it may be that the Night Support Officer (NSO) is not present all the time as they need to move around our three residential houses and may need to use the facilities. It can be reassuring for a child to know that they only need to open their door and close it again, for a staff member to come and check on them. We also recognise that despite completing a robust referral and matching process, sometimes a change in environment for a new child increases risk taking behaviour or key information to inform risk assessment often comes within the first 3 months of placement. Our initial assessment of risk therefore indicates that door sensors will be used for the first 3 months of all new placements reviewed on a monthly basis.

We know that there are times when children may leave their bedroom and engage in risk taking behaviour either towards themselves or towards others. We therefore have individualised risk assessments for each child to ensure that those who present risk to themselves or others have a door sensor active to safeguard themselves and others from harm. This will be highlighted in their individual risk assessment.

What we don't use door sensors for:

- We do not use door sensors as a measure of control, or to restrict a child's liberty, or to monitor them.
- We do not use door sensors during the day.
- We understand the child's need for privacy; therefore, the monitoring or surveillance is no more intrusive than necessary.

A child should never feel that they cannot come out of their room, whether that be to speak to a member of staff during the night, to get a drink or refreshment from the kitchen or if they need anything else (such as simple reassurance, staff time, medication, a change of bedding etc.). It is important that we help children understand that when the sensors are on, this does not mean they cannot come out of their room. If this was the case this would be a restriction and deprivation of liberty, which is not their purpose.

Emergency Procedures

We are fully compliant with all relevant fire safety legislation. Fire safety equipment is regularly serviced, inspected and if necessary repaired. Records are available on site. All children and staff are made aware of the fire evacuation procedure and assembly point should fire occur. All alarm tests and evacuation events are recorded and on file. We have a modern highly effective fire and smoke detection system which exceeds current requirements. The school's site manager checks the fire alarm system, conducts fire drills, reviews fire evacuation procedures and liaises with the Fire Brigade in respect of all fire safety measures. Emergency lighting is in place throughout the home and is checked in accordance with current legislation and guidance.

Contact Details

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Staffing Matters Residential Staff Team

Name / Job role	Date of commencement with WG/CHS	Experience relevant to role	Qualifications relevant to role
Lauren Draper Head of Care (Maternity)	31.03.2014	Over 16 years' experience of working within children in nurseries, pre-school and a Residential Special School setting.	<ul style="list-style-type: none">BTEC National Diploma in Children's Care, Learning & DevelopmentLevel 3 Diploma for the Children & Young people's Workforce: Social Care PathwayLevel 3 First Aid at WorkSafer Recruitment in EducationPBS InstructorDeputy Designated Safeguarding LeadLevel 5 Diploma in Leadership & Management for Residential Childcare (England)
Hannah Rigby Acting Head of Care	16.04.2012	Over 16 years' experience working with young people within Children's Homes and Residential School settings.	<ul style="list-style-type: none">NVQ Level 2 Teaching & Learning AssistantLevel 3 Diploma for the Children & Young people's Workforce: Social Care Pathway
Lynette Bathgate Acting Deputy Head of Care	12.01.2016	Over 9 years' experience at Cedar House School	<ul style="list-style-type: none">L3 Diploma (CYPW)Level 3 First Aid at Work
Damien Maher Team Leader	10.10.2012	Over 12 years' experience of working with young people both in a Children's Home and Residential School setting.	<ul style="list-style-type: none">NVQ L3 (CCYP)Level 3 First Aid at Work
Mark McLoughlin Deputy Team Leader	02.10.1995	Over 29 years' experience working with children with special educational needs. Mark has been working at Cedar House since 1995.	<ul style="list-style-type: none">NVQ L3 (CCYP)

Lee Knagg Deputy Team Leader	20.11.1995	Lee has over 29 years' experience working with young people within Residential Special Schools. Lee has previously worked as Pastoral Manager in school, before moving to the residential provision.	<ul style="list-style-type: none"> • NVQ Health & Social Care Assessor • NVQ L3 (CCYP) • NVQ Level 4 Health & Social Care (Children & Young People) • ILM Level 3 • Level 3 First Aid at Work
Nicola Maguire Deputy Team Leader	28.08.2012	Over 21 years' experience of working in Children's Homes and Residential Special Schools.	<ul style="list-style-type: none"> • NVQ L3 (CCYP) • NVQ Level 4 Health & Social Care (Children & Young People) • Level 3 First Aid at Work
Joseph Nott Deputy Team Leader	19.02.2018	Joe has over 7 years of experience working in a Residential Special School as a support worker. Previous to this Joe worked as a teaching assistant in a Primary School.	<ul style="list-style-type: none"> • FA Primary Teachers Award • L3 Diploma for the Children & Young People's Workforce (Early Learning & Children) • BTEC Level 3 Diploma (specialist 60119) for Residential Childcare (England) • PACB (PRICE) Instructor • In progress: Aspire (Institute of Leader and Management)
Karren Ward Residential Support Worker	04.06.2018	Over 7 years' experience of working at Cedar House School.	<ul style="list-style-type: none"> • BTEC Level 3 Diploma (specialist 60-119) for Residential Childcare (England)
Aaron Winder Residential Support Worker	25.01.2021	Over 4 years' experience of working as a Residential Support Worker at Cedar House School. Previous to this Aaron has been a football coach for a youth team.	<ul style="list-style-type: none"> • BTEC Level 3 Diploma (specialist 60-119) for Residential Childcare (England)
Laura Holmes Residential Support Worker	23.09.2019	Over 6 years' experience working at Cedar House School. Before this Laura worked for 10 years' supporting adults with Autism in the home setting.	<ul style="list-style-type: none"> • BTEC Level 3 Diploma (specialist 60-119) for Residential Childcare (England)
Deborah Chadwick Residential Support Worker	27.03.2022	Deborah has worked at Cedar House School for over 3 years. Before this Deborah worked for 15 years at a private boarding school as part of the health care team and has 20 years' experience running youth clubs in her local parish.	<ul style="list-style-type: none"> • BTEC Level 3 Diploma (specialist 60-119) for Residential Childcare (England)
David Chell Residential Support Worker	06.01.2020	Over 5 years' experience working in a Residential Special School.	<ul style="list-style-type: none"> • BTEC Level 3 Diploma (specialist 60-119) for Residential Childcare (England)

Amanda Geidmintis P/T Residential Support Worker	11.04.2005	Amanda has 20 years' experience working at Cedar House School. Before becoming part time, Amanda worked full time on the pastoral team and then as residential support worker.	<ul style="list-style-type: none"> • BTEC Nat Dip in Design • NVQ L3 (CYPW)
Mark Storey Residential Support Worker	03.05.2022	Over 3 years' experience working in residential settings.	<ul style="list-style-type: none"> • BTEC Level 3 Diploma (specialist 60-119) for Residential Childcare (England)
Karen Murphy Waking Night Staff	02.09.2024	Karen has over 1 years' experience at working at Cedar House School. Previously to this, Karen worked in SEN transport for 2 years. Karen was a passenger assistant for a year and then a driver, transporting children to and from school.	<ul style="list-style-type: none"> • In progress: BTEC Level 3 Diploma (specialist 60-119) for Residential Childcare (England)
Hazel Jacquemain Waking Night Staff	03.09.2015	Hazel has recently taken on the role of Waking Night Staff. Hazel has over 10 years' experience working as a domestic assistant at Cedar House School and has built positive relationships with the children and staff. Prior to this, Hazel was a school crossing patrol assistant.	