

SPECIALIST EDUCATION SERVICES

Leadership and Management in the Deputy Care Manager Role

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*The 6 most important words: "I admit I made a mistake."
The 5 most important words: "You did a good job."
The 4 most important words: "What is your opinion."
The 3 most important words: "If you please."
The 2 most important words: "Thank you,"
The 1 most important word: "We"
The least most important word: "I"*

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“Good Leadership is adopting a style which suits the situation and thereby both achieves the task and leaves the team stronger and the individual team member with a sense of satisfaction and pride.”

(Trethowan, D. 1989. Management in Education Series. Leadership)

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*A Leader is best when people barely know he exists
Not so good when people obey and acclaim him
Want when people despise him
But of a good leader who talks little
When his work is done, his aim fulfilled
They will say, "We did this ourselves."*

Chinese Philosopher Lao-Tse
2500 years ago

1 INTRODUCTION

This document has been prepared specifically for members of the DCM Team. It is aimed at giving you the basic tools to make the most of your leadership and management role. Rather than unnecessarily repeating information it assumes a knowledge of other established policy and practice documents. It should act as both an additional element of induction and as an aide memoir to developing practice.

2 LEADERSHIP AND MANAGEMENT

2.1 LEADERSHIP

Research has identified that:

Trust and confidence in leadership and management was the single most reliable predictor of employee satisfaction in an organization.

Effective communication by leaders in three critical areas was the key to winning organizational trust and confidence:

- Helping employees understand the company's vision.
- Helping employees understand how they contribute to achieving this vision.
- Sharing information with employees on both how the company is achieving the vision and how an employee is contributing to that achievement.

So in a nutshell – you must be **trustworthy** and you have to be able to **communicate a vision** of where the organization needs to go and how people are contributing to getting there.

2.2 PRINCIPLES OF LEADERSHIP

The key principles of leadership are: know yourself and seek self-improvement. In order to know yourself, you have to understand the following key attributes. Seeking self-improvement means continually strengthening these attributes.

- **Be technically proficient** – As a leader, you must know your job and have a solid familiarity with your team members' tasks.
- **Seek responsibility and take responsibility for your actions** – Search for ways to guide the organization to new heights. When things go wrong, and they always do sooner or later – do not blame others. Analyse the situation, take corrective action, and move on to the next challenge.
- **Make sound and timely decisions** – Use good problem solving, decision making, and planning tools.

- **Set the example** – Be a good role model for your team. They must not only hear what they are expected to do, but also see. *We must become the change we want to see* – Mahatma Gandhi
- **Know your team and look out for their well-being** – Know human nature and the importance of sincerely caring for your team members.
- **Keep people informed** – Know how to communicate with individuals and the team.
- **Develop a sense of responsibility in your team** – Help to develop good character traits that will help them carry out their professional responsibilities.
- **Ensure that tasks are understood, supervised, and accomplished** – Open, no-blame communication is the key to this responsibility.
- **Use the full capabilities of the organization** – By developing a team spirit and team skills, you will be able to develop the work of SES to its fullest capabilities.

Effective Leadership vs Ineffective Leadership

A feature of effective leadership is visibility. Leaders need to be seen.
Ineffective leaders generally hide or remain unobserved.

Leaders, to be effective, need to be able to communicate thoughts and feelings and describe behaviours to others.
Ineffective leaders usually have poor communication skills.

Leaders need to accept others, not to reject them.

One feature of acceptance displayed by effective leaders is openness and genuineness.
Ineffective leaders tend to be secretive and not genuine.

To be able to follow a leader others need to know why it is they are following.
Ineffective leaders rarely declare their intentions.

Effective leaders face problems, share them and seek to learn from them.
Ineffective leaders do not face problems but seek to avoid them.

Effective leaders seek appropriate responses to particular circumstances.
Ineffective leaders resolve difficulties in a punitive fashion.

2.3 LEADERSHIP vs MANAGEMENT

It is very important that although this document is primarily to help you in the DCM role and manage the work of Avocet or Turnstone House, the effectiveness of the establishment depends on your leadership of the staff team. Leadership is not a one person issue. It is not merely a Principal's or Registered Manager's or Head of Education's responsibility but one that we all share. We want to develop leadership within the staff team. In your quest to 'manage' well don't lose track of the need to lead.

"Management is a bottom line focus: How can I best accomplish certain things? Leadership deals with the top line: What are the things I want to accomplish? In the words of both Peter Drucker and Warren Bennis:

'Management is doing things right; leadership is doing the right things.'

Management is efficiency in climbing the ladder of success; leadership determines whether the ladder is leaning against the right wall."

(Covey, S. R. 1990 The 7 Habits of Highly Effective People: Powerful Lessons in Personal Change.)

The following table is given in illustration of the differences between leading and managing:

LEADING is concerned with:	MANAGING is concerned with:
Vision	Implementation
Strategic Issues	Operational Issues
Transformation	Transaction
Ends	Means
People	Systems
Doing the Right Things	Doing Things Right

(West-Burnham, J. 1992. Managing Quality In Schools.)

2.4 HELPING THE "NO LIMITS" VISION BECOME A REALITY

Everything you do and say contributes to making the vision live for people. All your work must be an example to others of how the vision is translated into reality.

All your interactions with colleagues and children support the vision. Your development work for yourself and others, the personal support work you do for colleagues, the way you explain the reasoning beneath judgements on issues and interactions with children, the way you help the team deal with disappointments as well as the excitement of seeing children achieve successful outcomes, all support the vision.

Being positive, optimistic, open minded and enthusiastic yourself will help the vision come alive for your colleagues.

2.5 DCM TEAMWORK

You are part of creating a professional team and have to act professionally in everything you do.

The staff need to be able to depend on you to be consistent with each other, work in support of each other and represent each other professionally, whether as a team or as individuals. That means that whatever difficulties or different views are held within the team this is always sorted out individually and privately or in management team meetings.

Not in front of the team and not in front of children.

This is a critical piece of role modelling.

The place to air issues is with the RM, in the management team meetings or in your PD sessions or your PSM sessions. Open and frank professional discussion is expected and supported in the right place at the right time and done in the right way. You can't expect the team to act in this way if you don't.

The team need this professional approach not least of all because they will have come in to work sometimes in trying times, and they need you to be part of the solution not part of the problem. You undermine their confidence if you act otherwise and that affects children and makes the work more difficult

2.6 DCM CODE OF CONDUCT

- **Professional relationships** – take precedence over personal relationships.
- **Support** - avoid undermining each other with direct or implied criticism of decisions made on previous shifts. Support any agreed corporate line of action.
- **Respect** - each other's work and strengths and show this respect with the use of both professional and caring language.
- **Trust** - both actions and intentions.
- **Follow-up** if work is left incomplete - don't leave a job undone because you think someone else should be responsible, you can always discuss it later.
- **Show unity** - portray an image that shows our support of each other. We sort problems out in private or in management team meetings.
- **Give and receive feedback** - professional constructive feedback to each other that increases individual and group development is a good thing.
- **Role model** respectful and professional relationships.
- **Protect confidentiality** within the management team.
- **Dress code** - a very visual display of our professional attitude.

2.7 MONITORING, EVALUATION AND REVIEW

Fundamental to the role of the DCM role is effective monitoring, evaluation and review. Core components of success are the use an up to date diary, having a weekly/monthly working structure, a working jobs list and using a summary self monitoring overview.

(See SES Monitoring, Evaluation and Review Policy and Practice)

Read and understand the Staff Handbook. This document will answer many of the questions that come your way from the team. You should know its contents thoroughly and at least be able to direct staff to appropriate sections. Make them use it – that way they will gradually absorb the information.

3.1 CHILDREN MISSING FROM CARE AND EDUCATION

Read and understand the SES Missing From Care And Education Policy and Practice document.

You need to know and understand the different definitions of:

- Missing
- Absent Without Consent, and
- Absconded

Young people who are at significant risk when absent without authority may have specific programmes designed to restrict or reduce incidents of absence, 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 within the young person's individual Risk Assessments.

If staff are aware of a child intending to leave the premises without authority, they should verbally persuade them from doing so where possible. Restrictive Physical Intervention should only be considered as a last resort, when you judge the child to be at significant risk should they leave site unsupervised.

If a child's whereabouts is unknown:

- Check the house and grounds.
- Experience shows that after 15 minutes it is worth checking again.
- Check the local area.
- After 30 minutes inform the most senior person available (usually the Registered Manager). If this occurs out of working hours then contact the 'First Port of Call' senior manager, this information is kept on the rota.
- If eventually the decision is made to inform the police, then parents and Placing Authority (Social Worker) should also be informed
- In contacting the Police be ready to give essential information, full name, date of birth, description including clothing, time last seen, vulnerabilities, any monies the child might have and any other relevant information relating to the individual child. Report the child as absent without consent, the police decide if it is a missing person.
- A copy of a Police missing person's report with all non-changing personal details completed will be kept on each child. This can be photocopied and handed to the police on arrival.
- An up to date colour photo image will be kept on file of each child to give to the police.

- Always defer to individual risk assessments that on occasion may require even more prompt action, and discuss with the person on First Port of Call.
- If the child is absent long enough to be deemed missing this will trigger the Notification of a Significant Event (see section 3.22). This would only in reality relate to children missing across a 24hr period and/or overnight, or if there is a suspicion they are at significant risk of harm, e.g. drug use or Child Sexual Exploitation.
- A child can only be classed as missing from care after full consultation with the First Port of Call (or Registered Manager).

It will be necessary to:

- Complete a 'Serious Incident' form on Clearcare.
- Complete the associated 'Young Person Absence Form' on Clearcare.
- Possibly complete an electronic Notification of Significant Events (check with First Port of Call).
- Maintain communication with family and Social Worker during the absence and on the child's return.

When the child returns there is often a difficult balance to keep between:

- Allowing the child to see that the adults are pleased they are back and safe.
- Showing disapproval of the inappropriate behaviour.
- Coming to an understanding of why the child left site without permission.

It is always preferable to treat the behaviour in a low key manner as responding in a highly reactive way can increase the power the young person feels they have in absconding. It is likely that newer admissions use leaving site without permission to test us out – it may well have been a previously powerful tactic.

Nevertheless the child should be welcomed back and offered food and drink, especially if they have been absent for a number of hours.

The process of how the child has been returned to the house needs to be clearly recorded on the Serious Incident and Young Person Absence forms. If deemed a missing from care event, details of statutory missing from care interviews carried out by the placing authority also needs to be clearly requested and recorded on the Young Person Absence Form.

If a notification has been completed, it is the responsibility of the Deputy Care Manager to record this in the green notification log including the reference number provided via the online system. Following the event, a resolution email including details of all actions taken and completed must be send to Ofsted. The date of this email needs to be recorded in the green notification log. If the missing from care episode concerns child protection, the resolution must be completed using the online Ofsted system.

3.2 TRACKING STAFF ABSENCES

Read and understand the SES Staff Attendance Policy and Practice document.

(When a member of staff reports absent it is essential to refer to the staff rota, establish what cover is needed and take the necessary action to put this cover in place).

Forms used for tracking staff sickness absences

- Initial Absence Action Slip
- Ongoing Absence Contact Slip
- Return to Work Meeting
- Sickness Absence Record
- Record of Absence Other Than Sickness or Annual Leave

3.2.1 Initial Reporting of Absence

The person receiving the call from a member of staff reporting sickness (or unexpected absence for another reason) completes an INITIAL ABSENCE ACTION SLIP. The details are passed to the Head of Education or duty DCM. The completed slip is then taken through to the main office and placed in the 'admin in' tray, in a confidential envelope. It is copied to the Registered Manager for information.

3.2.2 Sickness Absence Record Form

On return to work **the absentee** is responsible for completing an appropriate Absence Form, depending upon the type of absence. **The absentee** is responsible for ensuring that their Absence Form is handed in to the Main Office within 7 days. Failure to do so will result in loss of pay.

3.2.3 Record of Absence Other Than Sickness or Annual Leave Form

Forms for short notice absences to cover an emergency are initiated by the duty DCM or the Head of Education when the absence is reported. For planned absences, the form is completed in advance and authorised by the Head of Education or Registered Manager. In both cases the staff member must sign the form on return to work and take it to the main office and place in the 'admin in' tray, in a confidential envelope.

Planned absence needs to be requested in advance and the form completed.

It is the responsibility of the staff member to complete this form within 7 days of return to work and forward it to the main Office within 7 days. Failure to do so will result in loss of pay.

3.2.4 Ongoing Absence Contact Slip

A brief record of any contact with the absent staff member by any person, whether the call is made or received, or a visit takes place, should be recorded on the ONGOING ABSENCE CONTACT SLIP. The slip is taken through to the main office and placed in the 'admin in' tray in a confidential envelope.

3.2.5 Return to Work Meeting

This meeting is held with a line manager (Duty Care Manager (which may be a Team Leader), Head of Education, Deputy Head of Education, Registered Manager or Head of Care), and is recorded on the RETURN TO WORK MEETING FORM. The completed form is taken through to the main office and placed in the 'admin in' tray in a confidential envelope.

3.2.6 Staff Absence File

The Learning Centre maintains a central staff absence file for the Learning Centre team. The contents of this are:

- Sickness Absence Record Forms
- Pending forms for those currently absent
- Initial Absence Action Slip Blue
- Ongoing Absence Contact Slip Green
- Return to Work Meeting Form Pink
- Master of each document

Note: master documents are also in the Admin Forms folder in the staff area of the network.

IN SUMMARY

- 1 Initial absence Action Slip is completed.
- 2 Ongoing Absence Slip is completed, if necessary.
- 3 Return to Work Meeting Forms is completed.
- 4 Sickness Absence Record or Absence Other Than Sickness Form is completed by the staff member within 7 days of return.

3.3 ALARMS AT AVOCET HOUSE

There are 5 alarm systems to consider:

3.3.1 Burglar Alarm

The code for this is confidential to the Management Team.

The panel is situated in the front hall near the under-stairs cupboard. It is to be set when the house is to be left empty. If this is the case then a check is necessary to ensure that all windows are closed and the building is secure.

3.3.2 Learning Centre Alarm

It is situated just inside the LC front door, to the right. It is set whenever the Learning Centre is left empty.

3.3.3 SES Office Alarm

The code for this is confidential to the Management Team.

It is situated to the right just inside the main door and set outside of office hours.

3.3.4 Internal Alarms

The control panel is situated in the corner of the house office. Each of the child's bedroom doors is connected to this system, as are the front and laundry outside doors and each of the double doors into the conservatory. It is set to alert the duty DCM to any child leaving their bedroom at night or anyone opening the exit doors.

3.3.5 Coach House Alarms

There are two control panels. One is situated in the corner of the office/sleeping in room and is connected to each of the child's bedroom doors and the outside doors. It is set by the person sleeping-in to alert them should a child get up in the night or should anyone enter or exit through the external doors.

The second control panel is for the burglar alarm, and is situated just inside the roadside external door. The code for this is confidential to the Management Team. It should be set if the premises are left unattended or on the rare occasion that the Coach House is empty overnight.

3.3.6 Pavilion Alarm

The Pavilion alarm panel is situated on the kitchen wall above the worktop. It is set whenever the Pavilion is left empty.

3.3.7 Fire Alarms

The information panel is situated in the front hall adjacent to the burglar alarm.

On each shift the DCM is responsible for checking that it reads "Normal Operation", which is then noted in the Daily Log. In the event of a fault showing:

- Reset the panel and/or refer to the Handyman.
- Contact First Connect for advice only (Emergency Numbers List).
- Inform the Registered Manager or First Port of Call and ask for authorisation if a call out is required.

Fire Alarm testing is the responsibility of the Handyperson and in their absence the Duty DCM. The Fire alarm test is carried out between 09:45 and 10:00 each Monday.

For further details of fire drill procedures refer to:

- Health and Safety Policy and Practice document
- The Staff Handbook.

3.4 ALARMS AT TURNSTONE HOUSE

There are the following alarm systems to consider:

3.4.1 Burglar Alarm

The code for this is confidential to the Management Team. The panel is situated in the small corridor by the boiler. There is a main burglar alarm set for the whole house should it ever be left totally unoccupied. This is only a rare event but if this is the case then a check is necessary to ensure that all windows are closed and the building is secure.

The Learning Centre has a separate system by the side door for the same eventuality. The Learning Centre alarm is set each evening once the last person leaves.

3.4.2 Internal Alarms

Bedroom alarms are activated from the House Office and are designed to provide additional security to bedrooms and alert adults to any children who leave their rooms once they have been set. There is an additional panel in the sleeping in room on the first floor for the same purpose.

3.4.3 Fire Alarms

The information panel is situated in the small corridor next to the boiler.

Fire Alarm testing is the responsibility of the Handyperson and in their absence the Duty DCM. The Fire alarm test is carried out at 1000 hrs each Monday.

For further details of fire drill procedures refer to:

- Health and Safety Policy and Practice document
- The Staff Handbook.

3.5 ANNUAL LEAVE

Annual leave must be booked at least four weeks in advance. Any leave requested to take place during Learning Centre closures is discussed at the management Team Meeting.

You need to ensure that during your absence your particular responsibilities are met, for example:

- Any report writing due for completion during or immediately after your leave is in place.
- Any committees you normally attend are aware of your absence.
- Any ongoing work is appropriately delegated.
- That the children, especially those you Case Co-ordinate, are aware of your absence and return date.
- Liaise with Personal Tutors and those you line manage to ensure they are supported and their needs are met in your absence.

On return from annual leave:

- Allow time to update yourself before running a shift.
- You will need to read the Daily Log, Care Plan updates, Risk Assessment updates, minutes of meetings missed and Children's Diaries.

- Meet with Personal Tutors regarding any developments in your absence.
- Re-acquaint yourself with the children, with particular attention to those you Case Co-ordinate.

3.6 BASIC CARE

As a DCM you are responsible for maintaining a high quality of care and nurture that is also consistent with individual Care Plans.

Basic Care is essentially about good quality parenting but its components are too often underrated as lesser tasks that are without status. This is a falsehood. The considered delivery of good basic care is powerfully therapeutic, it builds relationships, delivers nurturing, educates and sets standards. It is the shared responsibility of all adults and is the hallmark of good practice.

Basic Care should be the touchstone of a high standard of professional practice that might be illustrated by:

- the manner of waking children in the morning or greeting children
- support in getting ready for the day/event suitably dressed and properly equipped
- preparation of breakfast
- knowing where the children are and what they are doing
- care and individualisation of bedrooms, care and presentation of personal belongings with adequate storage and shelving
- changing, or supporting a child to change, bed-linen
- laundry, care of clothes and ensuring children know where to find their clothes
- letting children know what will be done on their behalf while they are in the Learning Centre or asleep, such as arranging an outing or doing laundry
- care of the home in terms of cleanliness and presentation
- insistence on high standards of personal hygiene and dental care.
- nurturing by washing a child's hair or trimming finger and toe nails.
- preparation and presentation of meals
- ensuring children have a balanced diet and adequate drinks throughout the day
- instigating relaxation time and bedtime routines, with supper and bedtime conversations or story reading
- giving time and reassurance
- helping to build a child's confidence
- supporting children's interactions with peers and adults
- helping children learn from whatever they are doing
- engaging children in meaningful and interesting activities
- being a role model in how you conduct yourself
- listening to children

All these and many more are but illustrations of what basic care means. However high quality care is not institutional or oppressive. If it is subtle it conveys indirect messages of attention to detail, value and a natural affection for the youngsters.

3.7 CAR INSURANCE CLAIMS

During office hours any insurance claims relating to pool cars or use of own cars for business use will be handled by the admin team. In an emergency if you need to contact insurers outside office hours please liaise with the Registered Manager or in their absence the Duty DCM. Once you have permission to make contact the following information will be of use:

- the insurance policy is in the name of “Avocet / Turnstone House School” on 0345 609 1284 (pool cars – number to be used in emergency only).
- the occasional business user insurance (own cars whilst on SES business) is by Royal and Sun Alliance on 0345 984 8383

3.8 CARE TEAM MEETINGS

These are held every Wednesday between 09:30 and 11:30. The preparation and chairing of the Care Team meeting is the responsibility of the Registered Manager or their delegate.

Minutes from this meeting are taken and directly after the meeting the minutes are checked by the chair and then posted in the Minutes folder in the Staff area of the network

3.9 SAFEGUARDING AND CHILD PROTECTION

Read and understand the SES Safeguarding and Child Protection Policy and Practice document.

As a DCM you are required to be a Designated Person for Child Protection. You will attend a one day training course delivered by the Norfolk Safeguarding Children Partnership. This training is then updated at appropriate intervals.

In the event of a disclosure/concern:

- Listen to the concern being expressed.
- If necessary instruct the member of staff expressing the concern to complete a Disclosure form clearly outlining the disclosure or the concerns and reasons for them. This must be dated and signed.
- Ensure the immediate safety of the child or young person.
- Consult with the Registered Manager (lead designated person); if for any reason this is not immediately possible proceed as designate to the Head of Care or Principal.
- If the child is from Norfolk inform the Child’s designated Social Worker. In their absence inform the Norfolk Safeguarding Children Partnership Child Protection Team, initially by telephone through the Children’s Advice and Duty Service (CADS).
- If the child is from out of county inform the Child’s designated Social Worker. In their absence inform that Placing Authority’s Child Protection Team and the Norfolk Safeguarding Children Partnership Child Protection Team, initially by telephone through CADS.
- Email (secure) the Disclosure form to the child’s Social Worker or the Child Protection Team worker.

- When two placing authorities are involved they are responsible for their liaison with each other, you take your lead from the child's own Placing Authority who are duty bound to provide advice and assistance and will be responsible for co-ordinating the further conduct of the case. However the MASH team in Norfolk must be contacted at this point, potentially through CADS. The DCM should hold the social workers accountable and not be led into taking actions other than those laid in the CP protocols, e.g. any phone call to the police must come from the social worker.
- Take no further action without first consulting the Child Protection Team. Keep them informed of any further developments.
- Immediately notify Ofsted of a Child Protection referral by completing the online notification form that is emailed directly to Ofsted, a copy is saved and printed before being placed in to the Young Person's Child Protection file. Ofsted is informed of the instigation and outcome of any child protection enquiry.
- Make an entry in the Notification of Significant Events book.
- If there is an allegation made against an adult, this must be referred directly and immediately to the Lead Designated Person who will involve the Principal.

3.10 COMPLAINTS

Read and understand the SES Complaints and Representations Policy and Practice document.

The above document will help you to understand the crucial difference between a CONCERN and a COMPLAINT. You need to understand this before you do anything else.

The contents of the above document cannot be summarised here without detracting from the important key information you need, so make sure that you are completely up to speed with it.

Any complaint made by a child, parent or member of the team may first be handled by you as a DCM. It is very important that you handle this correctly and in accordance with the due process.

3.11 CHILDRENS' DIARIES

The Diaries are a means of communicating and recording the child's progress. New staff in particular may need your support in completing diaries.

Entries are made on the Clearcare system and should be:

- made towards the end of each shift
- non-judgemental, factual and without expressed opinion
- cross-referenced with serious incident reports and restorative approaches
- others mentioned in the diary should be identified by initials only
- made with consideration to children and families who may choose to access the information

3.12 COVER ISSUES

3.12.1 Holidays

Required holiday cover is indicated on the rota printouts. These are available to staff in the Daily Recording file kept in the house office. They are printed 16 weeks in advance allowing staff to record the shifts they prefer to cover when utilising their Banked Hours; if cover has not been signed up for by 14 days in advance of it being required then the Registered Manager uses the agreed Cover Criteria to allocate the cover. The Registered Manager will attempt to ensure that staff have at least one week's notice of such cover except in emergency situations when this may not be possible.

3.12.2 Short Term Sickness

To cover absence due to staff sickness the duty DCM should:

- 1 Refer to the ACCP Availability list and telephone those potentially available on that day to request cover.
- 2 Use the Cover Criteria to prioritise whom to contact to request cover (see section 3.13; criteria for Care Team and DCMs is the same)
- 3 If in the rare event that cover has not been secured the DCM will refer to the Cover Criteria to direct a member of the existing team to stay on shift.

NB A record of who has been contacted needs to be entered into the daily log which resides in the house office.

3.12.3 Longer Term Certificated Sickness

This is covered in the same way as holidays.

3.12.4 Holidays and Weekend Cover

- 1 Care staff cover weekends on a rotational basis.
- 2 The cover person for each weekend is indicated on the rota printouts.
- 3 If a staff member wants to book leave when they are due to cover, they should arrange for a replacement.
- 4 They must then note the name of the replacement on the rota printout.
- 5 This is then confirmed when the printout is updated.
- 6 Leave cannot be granted until this process is complete.

3.13 COVER CRITERIA FOR DCMs

The Criteria for short notice cover is to call the DCM who is on call for that week. In the rare event that they cannot cover the shift the following criteria will need to be applied:

- Consecutive hours on shift.
- Hours: Relative balance of current banked hours.

3.14 DAILY LOG

The purpose of this log is:

- To meet Ofsted requirements.
- To aid communication.
- To record key pieces of information in relation to the daily operation of the house

The log is to be read at the start of each shift. Entries are more usually, but not exclusively made by the duty DCM. The outgoing DCM must carry forward any entries pertaining to unresolved issues, even if this means re-writing the entry in that day's report.

3.15 DAILY RECORDING FILE

3.15.1 Purpose

- To provide information for Ofsted about who is in the house when i.e. how shifts are covered in staff absences.
- A protective mechanism should there be an incident in the house.
- A means of monitoring worked hours.
- To enable an up to date and accurate record of individuals' banked hours to be produced on a weekly basis.

3.15.2 How to Complete

- DCM should check the whole sheet at the end of their shift. Gaps from the early shift should be investigated and completed.
- Sheets to be forwarded, every Monday morning to the Administrator.
- **Due on and due off** times are already completed for the whole shift team. These should not be altered.
- **If covering for a colleague**, and not scheduled to work, record actual time on and off, and record hours in the plus column. Give reason.
- **Actual time worked.** If this is different from the due on/due off times, enter plus or minus hours and give reason.
- **If an adult is in to complete their non-direct time** then these hours should be indicated in the correct column.
- Leave actual times blank if ill or on leave for whole shift. Do not record plus or minus hours. Tick the appropriate column with reference to the Rota File and Holiday File as necessary.
- A **sickness record form or leave form** must be completed.
- **Sleep Overs** must be recorded here. This is used to work out pay.
- **Off site** – tick this column to record if staff members are off site and the reason for this. Still record the times and plus or minus hours, if necessary.
- If an adult from Turnstone house works as part of the Avocet House Care team then this needs to be clearly marked at the bottom of the daily recording sheet. Similarly if for any reason an adult from Avocet (in negotiation with the first port of call) is deployed to Turnstone this needs to be entered clearly on the sheet. The same process would apply to either homes.

3.15.3 What You Need To Remember

- Work out the number of plus or minus hours, using decimals, i.e. 0.25, 0.5, etc.
- Use the 24 hour clock
- Include Assistant Child Care Practitioners (this is the only record to work out their pay)

More detail of how to complete the daily recording sheets can be found on the management area of the network in the Management Meetings folder under Related Documents folder.

3.15.4 Special Cases

- If a person is on leave, but comes in for a few hours during that period, e.g. to attend training, record this time as plus hours. The leave record should not be adjusted.
- **See also notes on Banked Hours.**

3.15.5 Rotas

Printouts of the Rotas are kept in the Daily Recording File and updated weekly by the Registered Manager. The printouts give details of who is on each shift, sleeping over, on weekend cover, on holiday, off-site training or off sick.

The rotas are available 16 weeks in advance and also show where cover is required, enabling staff to commit to working banked (flexible) hours by putting their name in a space labelled COVER.

If you need to 'phone for cover at short notice refer to 3.12

3.15.6 Booking Leave

- Refer to the **Holiday File**. This is a calendar showing who has booked holiday and when. Up to 3 care staff and 1 DCM are permitted to take leave on any one day so you can check what is available. No more than 1 care staff member from a team to be on leave at the same time. The Registered Manager reserves the right to deviate from the maximum number of adults permitted to be annual leave at any point if staffing levels are a concern.
- Complete a Holiday Request Form at least four weeks in advance of the dates requested and pass it to the Head of Care or Registered Manager.
- Your name being entered into the Holiday File by the Registered Manager confirms the holiday has been granted.

3.16 DCM AS CUSTODIAN OF THE BUILDINGS AND GROUNDS

As DCM you are responsible for ensuring the buildings and grounds are looked after whilst running your shift. This means that you should be very aware of the state of the place, its tidiness and appearance to others, staff and visitors. By attending quickly to litter, graffiti, etc., as well as the state of shared rooms and communal areas we signal standards and expectations to the team and visitors. It is also part of signalling care and positive regard to children.

Part of this overall responsibility is a clear view of issues that need to go in the maintenance book and a clarity on whether they require follow up in some way in addition to the purely practical response of the handyman.

The same is true of the care of pool cars. Ensuring by your monitoring that they are returned and kept in a clean and tidy condition inside signals the importance to the team and lifts their practice.

3.17 DEPUTISING FOR THE REGISTERED MANAGER: WHAT DOES THIS MEAN?

In the absence of the Registered Manager staff and children need an easily available person as a point of reference who has the authority to make decisions, carry concerns forward, listen and respond where required, etc. In fulfilling this function DCMs are automatically deputising for the Registered Manager.

As duty Deputy Care Manager you are responsible for:

- safeguarding the children
- ensuring care needs are met
- efficient operation of the house
- deployment and well-being of staff
- allocation of resources

As a Deputy Care Manager you must:

- be aware of all operational issues
- be aware of all aspects of policy and provision
- implement systematic planning and clear communication
- have the ability to take an overview
- have good decision making skills

There are certain circumstances in which the Registered Manager and/or Principal MUST be contacted:

- in the instance of a notifiable event
- where any doubt exists or advice is required
- before making major decisions
- where there is a financial commitment that needs authorisation by the budget holder

However we are required by regulation to be more specific and formally hold a policy on the Delegation of Authority. (See Appendix A).

The Job Descriptions of the Registered Manager and The Head of Care are also attached, (see Appendix B), in order for DCMs to better understand their deputising responsibilities.

3.18 HANDOVERS

A handover is given by the out going DCM to the incoming DCM and the new team of adults. It should start promptly and be finished within 30 minutes to allow the team to begin planning for the shift ahead. -DCM's need to finalise the handing over of Petty Cash and the completion of a medication handover.

The daily handover must be recorded on the Clearcare system; the forms for this will be automatically generated each day.

When giving the handover you need to:

- relay significant information about the individual young people, be factual and brief, there is no time for anecdotes,
- highlight any issues related to Individual Programmes,
- inform incoming shift team of any reparations or sanctions in place
- pass on any staff cover requirements,
- relay any information regarding medical issues,
- highlight any matters still outstanding in the daily log,
- make the in-coming team aware of any diarised appointments,
- give update on domestic tasks completed and those outstanding,
- refer to your previous plans for the shift (see running a shift),
- instruct your team as to where and how you wish to deploy them,
- plan and structure the breakfast/lunchtime period,
- listen without interruption and anecdotes.

Remember that you are setting the tone for the incoming staff who will be best served by your positive attitude and concern that they get the information they need.

Before finishing the shift you must ensure:

- the Daily Recording Sheets are up to date,
- any pending issues relating to Incident Reports are addressed,
- that you officially sign off the Petty Cash Tin,
- that you have completed a medication check,
- both you and the in-coming DCM to sign the Handover Sheet,
- check any outstanding and draft tasks on Clearcare,
- roll forward any outstanding issues in the Daily Log.

When receiving the handover you need to:

- be attentive to the information being relayed to you,
- take notes as an aide-memoir,
- refer to your previous plans for the shift (see running a shift),
- Check Clearcare, medication, and petty cash,
- Designate an adult to complete the team handover sheet.

3.19 INCIDENT REPORTS

Read and understand entries about Incident Reports in the SES Staff Handbook and the SES Positive Management of Behaviour Policy and Practice document.

There are two types of Incident Reports:

- 1 for incidents resulting in Restrictive Physical Intervention (RPI)
- 2 for any other Serious Incidents (Non-RPI)

Following an incident resulting in an RPI you must:

- ensure the staff member instigating the hold completes a 'Serious Incident Form Involving Physical Intervention' on Clearcare before going off shift,
- in the case of a Ground Hold complete and record health checks,
- ensure that a Young Person Response form is completed with the child,
- ensure parents (where necessary) and Placing Authority (social worker) are informed,
- hold a post incident discussion and ensure those involved are supported and debriefed,
- complete the 'HoEd/DCM Post Physical Intervention Communication and Discussion Form,
- inform the Registered Manager, who will monitor the form, and ensure a copy is emailed to the Placing Authority.

A Serious Incident (Non-RPI) is:

- physical attack on staff or another child
- leaving site without authority
- any deliberate damage to property
- any unusual incident of extreme behaviour e.g. indecent exposure

Following a Serious Incident (Non-RPI):

- ensure the staff member completes a Serious Incident Form (No Physical Intervention)' on Clearcare before going off shift
- ensure parents (where necessary) and Placing Authority (social worker) are informed,
- complete the 'Young Person Absence' form (if applicable)
- complete the 'HoEd/DCM Post Serious Incident Communication and Discussion Form,
- inform the Registered Manager, who will monitor the form, and ensure a copy is emailed to the Placing Authority.

3.20 MANAGEMENT TEAM MEETINGS

Management Team Meetings are held every Tuesday morning at 10.00.

Chairing meetings:

- Positive recognition of contributions from others.
- When someone else has specific responsibilities or knowledge – defer to them to explain a point.
- Try to use ‘we’ instead of ‘I’.
- At the end of discussion summarise key points and clarify who’s doing what.
- Role model giving people time to complete answers and bring others in so that all have chance to contribute.
- Try to think through and be clear and concise in your description of the task in hand or when you offer a contribution.

3.21 MEDICATION FILE

Read and understand the Administration of Medicines Policy Statement in the SES Health and Safety Policy and Practice document

3.21.1 Personal Medication Record

This is the front sheet of each young person’s section in the medication folder. It includes;

- Details of doctor, dentist and optician, NHS number.
- Details of any allergies and operations.
- Details of medication, past and present.
- Major illnesses and vaccinations.

3.21.2 Medication Cards

Filed by name of young person, when giving medication:

- check name, dose and time the medication is to be administered
- wash hands
- young person should be given privacy and individual attention
- give the prescribed medication
- complete medicine card with signature, date and complete the ‘amount left’ column (**do not delay - record as medication is administered**).
- adjust the amount in the ‘amount left’ column
- waste medication needs to be returned to the doctors and recorded in the waste book which needs to be signed by the surgery once medication is returned

3.21.3 Homely Remedy Cards

Filed by name of young person, when giving a remedy:

- check the remedy is on the permitted remedies list
- administer as for medication detailed above
- complete Homely Remedies Card with date, remedy, dose, reason and signature

Homely remedies that are locked in the medication cupboard form part of the daily medication check. Items should be restocked as and when required if

supply is low. This is to be completed by any DCM completing the daily check and will be monitored by the delegated DCM overseeing medication.

3.21.4 Off Site Medication Card

The back of the individual medication card is used to record medicines taken for periods off site such as time at home or residential camps. When preparing medicine to be taken off site:

- count out enough doses to cover the period the young person will be away
- complete Off Site Medication Card with name, quantity, medicine, date/time booked out, date/time booked in, reason and signature
- ensure this is also documented on the front of the individual medication card to show medication off site.
- When a young person has medication off site this is documented on the individual medication card to account for all times/doses.

3.21.5 Daily Medication Check

The daily medication check is the responsibility of the DCM or Team Leader.

- a daily medication check is completed for all prescribed medications and homely remedies required to be kept within the locked cabinet; this is documented on the medication cards
- a daily check doesn't need to be completed if the same DCM is working consecutive days and they have already completed a medication check
- any medication that has less than eleven days supply left is the trigger to order a repeat prescription; the DCM must complete this.
- medication levels must be monitored closely, taking into account bank holidays which would delay receiving a medication order.

3.21.6 Weekly Medication Check by Delegated DCM

The weekly check is completed by the delegated DCM.

When checking the medication:

- Count the stock to confirm that it tallies with the number in the 'Amount Left' column of the Medicine cards.
- Complete the **Weekly Medication Check** card with Date, Name of Medication, Amount, Comments and Action Taken, Name and Signature.

3.21.7 Storage of Medication

Medication is kept in:

- cupboard for medication in use
- medication fridge
- cupboard for stock medication if required
- controlled drugs cabinet for controlled drugs only

3.21.8 Further Guidelines

- date any medications the day you open them
- return to pharmacy any medication on or just prior to expiry date and record returned medication in the **Waste Book**
- never share medication unless prescribed
- never double a quantity e.g. give 4 X 100ml instead of 400ml, this can result in overdose as each strength tablet has a different release time.

3.21.9 First Aid Boxes

These are checked on a specified day each week by a designated team member and are restocked immediately if anything has been used.

3.22 NOTIFICATION OF SIGNIFICANT EVENTS (NOTIFIABLE EVENTS)

Read and understand the Notification of Significant Events Policy and Practice document.

Notifiable Events are those listed in the Children's Homes Regulations 40.

In accordance with the 'Guide to the Children's Homes Regulations including the quality standards' (April 2015) the Homes' Registered Manager or designate has a responsibility to notify the appropriate authorities within 24 hours of the event.

On the occasion of a Notifiable Event the duty DCM must:

- Consult with the First Port of Call, and inform the appropriate authorities and other relevant persons in accordance with Regulation 40 of the Children's Homes Regulations.
- Complete an electronic notification form which is located on the Ofsted website and submit within 24 hours
- Save and submit the form to Ofsted, the electronic copy is placed on to the network under the relevant section and a copy is printed and placed in the child's main file (for Child protection incidents please refer to section 3.9).
- The confirmation email of receipt needs to be kept and placed in the main file in addition to the notification.
- Pass the completed **Notification of Significant Events** form to the RM immediately on completion.
- Make an entry into the Notifiable Events book.

3.23 RESOLUTION OF NOTIFIABLE EVENTS

Ofsted also require notification of outcomes (resolution) following an event. This is found on their website in the same way as the online notification form. This is the responsibility of the DUTY DCM in liaison with the Registered Manager.

The DUTY DCM should:

- Identify when the significant event has a resolution and/or an agreed strategy in liaison with the placing authority.

- In the case of a child protection issue, secure a copy of agreed strategies and outcomes from the Placing Authority.
- For child protection notifications complete and send the resolution using the Ofsted online notification form and cross referencing the previous notification sent.
- For all other notifications, the outcome of the notification must be communicated in email to the allocated Ofsted Inspector for the establishment.
- A copy of the resolution must be printed off and retained for our records. An electronic version is saved and kept in the individual child's folder located on the network (for Child protection incidents please refer to section 3.9)
- The confirmation email of receipt needs to be kept and placed in the main file in addition to the resolution.
- Complete the resolution sent section in the Notification of Events log.
- Communicate the event to colleagues as appropriate.
- Please note that the resolution should be with Ofsted within 24 hrs.

3.24 POLICE INVOLVEMENT IN INCIDENTS

The decision to involve the police in issues at the house is a serious one and cannot be taken lightly or without full and complete information, as well as reference to the Head Of Care/RM and/or Principal. Once an incident is formally reported to the police it is logged onto their system as a reported crime and as such it gathers its own momentum. It cannot be undone.

The two likeliest reasons for triggering consideration about police involvement are extreme violence or reporting a young person absent without consent.

We have a close working relationship with the local Police. Decisions about what level an incident should be dealt with and what action we are requesting should be clear before the call is made. In most circumstances this will have been a product of a conversation with the Registered Manager and/or Principal. Wherever possible any police involvement should be planned in partnership with the assigned Police Liaison Officer.

If police support is required rather than the reporting of a crime you must make this clear in the phone call. The utmost care should be taken to avoid any phraseology that suggests you are reporting a crime, unless this is the specific intention.

The decision to report a crime or not should be taken after consultation with the RM/Head of Care and/or Principal. This is in order to offer you the fullest support and help talk over with careful consideration the best way of dealing with an incident. This does not negate an individual staff member's choice to report a crime following any such consultation.

If it is necessary to involve the police the number is available on the emergency numbers list. For a summary of the steps we need to consider when contemplating police involvement see the Positive Management of Behaviour Document.

3.25 USE OF BANKED HOURS

All adults have banked hours, which are hours that you have been paid for but are not rostered. These can be used in following ways:

- To pre-book cover for colleagues' holidays
- Any sickness cover
- To pre-book specific targeted activities with the young people outside your normal shift pattern, but during residential time. This should be arranged in liaison with the DCM who will be leading that shift and validated by the RM and/or HoC.
- Support children to attend specific activities during Learning Centre time
- Attending statutory training

4 DCM ROUTINES

The day-to-day routines make for the smooth running of a day or evening shift. To enable a smooth operation the DCM must be clear, concise and effective in delegating and managing his/her team. Total familiarisation of all day-to-day routines will assist in achieving this end. Concentration on the quality of its delivery should be a priority. A breakdown of the daily routines is given in an appendix at the end of this document.

4.1 RUNNING THE SHIFT

4.1.1 Planning and Preparation

While doing one shift start planning your next.

The Care Team are required to complete the Activity Planners at least two weeks in advance so you should check this and know what Activities will be on offer. Check the staff rota to see if there are any variations to the usual team (holiday cover/sickness, etc) this way you know which staff you will be deploying and if those on cover have also offered an activity for your shift. Check the diary as there may be some last minute appointments to consider on the day, but most of those you will have to accommodate will be in the diary already.

4.1.2 Planning Meetings

A planning meeting with the team takes place in the house office at 1330.

The purpose of the planning meeting is to:

- Liaise with the team to finalise the arrangements for the shift.
- Identify specific, clear primary aims and objectives for the shift.
- Lead, direct and motivate the team.

This should be done by:

- Making reference to the activity list, diary, house log, handover sheet, Clearcare tasks (including restorative approaches), daily care and risk assessments.

- Consider the deployment of team members with regard to the main house the coach house (at Avocet House) and individual young people.
- Recording the plans on the Daily Planning form on Clearcare (attaching your planning sheet).

The daily planning form is used in the first instance to record your planning decisions.

4.1.3 Team Debriefs

The debrief should be led by the DCM and held with the team at the end of the shift once the household tasks have been completed. It must be recorded on the Daily Debrief form on Clearcare.

The purpose of the debrief is to:

- Reflect on the original planning meeting and the objectives set
- To discuss the evening activities and young people's engagement
- To look at possible improvements that could be made
- To consider opportunities for restorative approaches
- To celebrate positives

4.1.4 Individual Feedback

Giving individual feedback is something that should be part of day-to-day practice, but sometimes it is useful as a summary at the end of a shift. Remember that critical friend feedback should reinforce good practice and also correct unwanted practice where that exists. The end of the probationary period (and formal feedback) should hold no surprises for team members.

4.1.5 Your Practice

A positive, relaxed but professional attitude is essential. Your demeanour in the house will affect the mood of your team and in turn that of the children. Your confidence and good humour will have a positive effect on those around you.

The DCM Day Schedule gives you a detailed prompt list of the practical aspects of running a shift. It is useful to print one off and use it as a checklist. These can be found on the Management area of the Network.

4.2 MAIN HOUSE

As duty DCM running a shift the main considerations are:

- take Handover (see section 3.17)
- read the daily log
- deploy staff with reference to the Activities List, washing days, basic care and cleaning routines, Children's Individual Budgets and the House Diary
- a member of the care team will be given responsibility for the completion of the team handover sheet
- consider staff needs in relation to their individual roles:

- a. Personal Tutors needing time to attend to casework
- b. Link Tutors needing time to research and organise activities as well as supporting in specific casework tasks
- c. All staff needing time complete recording tasks in the Daily Log, Children's diaries, File Notes and Behaviour Programmes
- consider time to give Medication and complete Medicine Cards (see section 3.20)
- refer to DCM Check List as a prompt to ensure all routines and the Basic Care issues are covered
- attend to the Daily Recording File (see section 3.14)
- consider throughout the shift all necessary recipients of any communication Learning Centre, main office, Registered Manager, Principal, Outside Agencies etc
- consider throughout the shift all avenues of communication to be utilised Daily log, E-mail, House Diary, Children's Diaries, Voice Mail etc
- prepare for Handover, planning your handover to give your colleagues, concisely, all the information they will need
- ensure that you and your team leave the house and office tidy for colleagues on the next shift

4.2.1 Taxis

The taxi file documents all details of any child's taxi journeys, with taxi firms or with SES casual drivers. The file will have been taken by the administrator to the House office prior to any journey booked. Before letting a child go in a taxi refer to the file:

- check to see if we have a copy of the drivers DBS check on record, failing this he/she will have been instructed to bring it with him/her for you to photocopy
- take the drivers mobile number, evidence of identity and that of any escort
- check section on medication arrangements
- consider the child's need for a snack on the journey
- inform parents of any significant change to routine
- record notification of safe arrival, if parents haven't phoned at the estimated time of arrival phone them
- sign and record any comments you have
- return file to main office on the following morning, or Monday morning if used over the weekend.

4.3 AVOCET HOUSE COACH HOUSE

The Coach House is an extension of the main house and as such is run in the same way, dependent of the age and need of the young people living in the coach house. Any variations relate to individual care plans of the young people based in the coach house.

- At least one member of staff should be deployed there at all times.
- If the young people have left for a brief visit to the main house the staff deployed in the Coach House should remain there, this avoids children returning to an empty building or being followed back and forth.

- As duty DCM you should make at the very least, one visit to the Coach House on each shift. This allows you to monitor the cleaning routines and increases the inclusion of the Coach House as part of Avocet House as a whole.

4.4 WEEKENDS

On weekends the atmosphere in the house as in any home should be more relaxed:

- there can be flexibility on the timing of the morning routines
- children may sleep longer
- utilise the early morning period for those tasks related to individual roles detailed above and care of the house
- finalise the planning of the days activities, there can be last minute changes required e.g. due to changes in staff and the changing needs of individual children
- consider the preparation of meals as the cook does not work at the weekends
- if there is a staff absence at the weekend refer to the cover list
- start planning your next weekend as duty DCM, this includes requiring the care staff to complete the Weekend Planner 2 weeks in advance

4.5 SHIFT EXCHANGES

An exchange of shift must be requested and agreed in advance using a **Shift Exchange Form**, which needs to be signed by the person requesting the exchange, the person fulfilling the exchange and the DCM whose shift it affects. This form then goes to the Registered Manager for information that relates to rota planning.

If the individual agreeing to cover a shift becomes unavailable through sickness then the responsibility reverts to the rostered person who must work the shift themselves or find alternative cover.

If it is known in advance that the rostered person would be unable to revert to filling the shift then they should book leave from their annual leave allowance instead of swapping shifts.

If, in rare and exceptional circumstances, an unexpected domestic crisis arises which prevents the rostered person reverting to their own shift, their absence may be recorded as dependency and taken from their sickness allowance, or compassionate leave, or an assessment made which may result in an unauthorised absence. This must be discussed with the Registered Manager before a final decision can be made.

Where an unrostered member of staff is unable to fulfil an agreed swap because of sickness, this will also be recorded as sick leave.

5 FINANCE

5.1 RESIDENTIAL BUDGETS

Residential budgets are managed primarily by the Registered Manager, though individual staff may hold responsibility for parts of this budget, e.g. the food budget is managed in the first instance by the Cook.

Residential Budgets can be accessed in two ways:

- as Petty Cash, or
- by submitting a Requisition form to the Registered Manager.

Requisition Forms are to be used by all staff wishing to access finance from a budget line other than those on the petty cash sheet.

5.2 PETTY CASH

Petty cash is provided for everyday expenditure under the budget headings on the petty cash sheet.

It is the responsibility of the duty Deputy Care Manager to ensure all cash spent is accounted for accurately, by:

- Ensuring staff sign for all cash taken, and that they understand their responsibility to return change and annotated receipts that reconcile.
- Recording the expenditure under the appropriate headings, including total spent and change, substantiated by receipts.
- Calculating the balance after each transaction.
- Transcribing the detail of each transaction to the reverse of the sheet; simultaneously, where the transaction includes expenditure under young people's personal budgets, this information is transcribed to the Personal Budgets Sheets.
- Counting the cash twice per shift, when you take over and again as you hand over, signing the sheet to confirm this reconciles with the calculated balance.
- Ensuring petty cash is part of every handover.

ANY INACCURACIES MUST BE INVESTIGATED IMMEDIATELY AND ERRORS RECTIFIED.

On a weekly basis, (Monday morning) a new petty cash sheet is started and those from the previous week along with all receipts are transferred to the main office.

5.3 CHILDRENS' ALLOWANCES

Pocket money is given to the children by the duty DCM on a Saturday (Turnstone House) or Sunday (Avocet House), or as dictated by the child's individual care plan. The amount of pocket money differs according to age. It is booked out of Petty Cash and also recorded in the child's Pocket Money folder where the child signs to confirm their receipt of it.

5.4 PERSONAL BUDGET RECORDS

Weekly expenditure for each young person is recorded under the following headings: activities, toiletries, and behaviour programmes. The children's personal clothing budgets must be agreed by the Registered Manager and accessed through a requisition form.

The expenditure is recorded on the petty cash sheet. At the same time, it is recorded on the Personal Budget Record Sheet. These tasks are the responsibility of the duty DCM. Both sheets must be completed in full. Where expenditure is for a group activity the total figure should be divided and recorded against each individual child.

A new Personal Record Sheet is started each week and resides in the Petty Cash folder.

The Personal Record Sheet is taken through to the main office on a Monday morning with the petty cash sheet.

On a weekly basis, retrospectively, the administrator:

- Cross references the petty cash sheet with the personal budgets sheet
- Transfers the data from the personal budgets sheet, to the spreadsheet. The sheet is not removed from the central file.

The spreadsheet resides in the staff area of the network, in the Personal Budgets folder. All staff may access this to check budgets. Spare blank forms are kept in the back of the file, along with a master copy for replenishing stock of these.

The spreadsheet is used to keep an up to date record of expenditure for each young person.

6 ROLE OF THE CASE CO-ORDINATOR

6.1 SUPERVISION, MONITORING AND EVALUATION OF CASEWORK

The Case Coordinator is responsible for the supervision, monitoring and evaluation of casework for a specific number of children. In performing this role:

- you should have detailed knowledge of each of your allocated children
- you should monitor the overall provision for specific children
- you should provide advice and support to the Personal Tutor from an objective overview
- you should monitor recording in casework files using the casework monitoring sheets and meet with the Personal Tutor on a monthly basis. This information must be shared with the Head of Care
- you should provide a focal point for school based and external professionals, where this cannot be delegated to the Personal Tutor
- you may provide specific counselling for the child when required

- you should monitor the child’s progress on any specific therapeutic or behavioural programmes
- you should act as liaison between the Principal, Registered Manager, Head of Care, PT, Learning Mentor and other appropriate colleagues
- you should prepare for and de-brief from home visits

6.1.1 Practical Pointers for Monitoring

The DCM role puts obvious demands on your time. It is crucial therefore to adapt “systems” whereby regular monitoring takes place so as to spread the work load evenly and yet still stay abreast of each individual child you are case co-ordinator to. It will soon become second nature once you are into the routine and the benefits will quickly become apparent. Chiefly it will keep you up to date so that you can intervene with positive reinforcement for good work or nip a possible problem in the bud at an early stage. The list below is by no means exhaustive but is merely to serve as an example of some practical options that will assist in providing the quality service that we are continually striving for.

- Reading the selected child’s diary at some point on each shift.
- Check the Casework files once a month and record your monitoring and copy to the Head of Care.
- Take time to refer back to the child's Review Report to see that any objectives or actions described in the review report are being met.
- Check the child’s Main File in line with the review process.
- Check the selected child’s Portfolio of Achievements and Needs in line with the review process.

It is the Case Co-ordinator’s responsibility to ensure that casework is kept up to date by the Personal Tutor.

Following the casework monitoring a detailed monthly update should be emailed to the social worker, this should include information about their progress, family contact, activities, behaviour programmes, medical issues and details of any incidents. The case coordinator must attach the updated daily care and risk assessments as part of the update. This email should be copied to the senior management team and placed on the network and in the child’s file in the relevant sections.

Don’t let the Personal Tutor struggle.

- Give help and advice where needed.
- Let them know not only where recording can be improved but also how this can be achieved through the designated support meetings scheduled on a monthly basis.
- Have clear discussion with the Personal Tutor over casework and current individual programmes running.
- Give positive feedback on good casework.

6.2 PAN MEETINGS

The Principal (or their delegate) chairs the PAN meeting.

It is your role to support and help the Personal Tutor/Learning Mentor partnership to function in terms of SES policy, contacts with external professionals and agencies, colleagues and parents.

- You must take an objective role and maintain an overview.
- Any plans involving the wider staff team will need to be relayed to the Management Team Meeting in order to maintain consistency.
- You will act as a liaison between Registered Manager and senior colleagues for the decision making process and feedback.
- You should contribute to the agenda.
- You should help order and clarify issues when needed.
- Always give practical advice.

6.3 24 Hr LEARNING

24 Hr learning is supported by the implementation of specific Learning Activities.

A Learning Activity is a planned, documented and evaluated activity that has direct links with the academic curriculum and/or PAN Targets. You should be familiar with the range of planning documentation for 24 hr Learning.

Read and understand the Learning Assessment, Recording and Reporting Policy and Practice document.

6.4 ADMISSIONS

Read and understand the Referral and Admissions Policy and Practice document.

Currently a Case Co-ordinator is responsible for components of the admission process. The Principal and Registered Manager handle the initial phases of referral and admission. At the moment the Case Co-ordinator is involved once the place has been offered and visits to Avocet House or Turnstone House are taking place.

Completion of the admission paperwork with the placement authority, (usually the social worker), and the family is the responsibility of the Case Co-ordinator. This might take place at Avocet House or Turnstone House or in the home, or its locality.

Admission documentation is available from the Principal. These comprise the Admissions Pro-forma itself and consent forms for various purposes. A checklist, which is part of the Admissions Pro-forma, will serve to ensure all points of information are covered.

The admission date is timed to allow at least 2 weeks for the information to be available to the staff team and for the Case Coordinator and Personal Tutor to give a case presentation at a Care Team Meeting prior to admission.

It is the responsibility of the Case Coordinator and Personal Tutor to complete relevant Care Planning and Risk Assessments by admission, and to commence Casework files.

It is your responsibility to ensure that the Personal Tutor has completed their preparations for the arrival of the child and to support that process, ensuring a satisfactory settling in period.

6.5 CONTACT WITH OUTSIDE AGENCIES

Maintain a professional approach with other agencies.

- Have facts at your fingertips when explaining a problem.
- Log phone calls and ensure you return calls promptly.
- Answer letters and compile necessary reports as quickly as possible.
- Ensure these contacts are recorded on Clearcare.
- Be prepared to provide support for your child's family as well as for the referred agency.

Work to your own limits of experience and expertise.

If you feel you cannot tackle a task, admit it. Either you will be given guidance or a more experienced person will work with you on difficult tasks. The Principal is always available to you for reflection and/or advice

The case coordinator has the responsibility to email a monthly update to the child's placing authority covering the following areas:

- Learning Centre attendance
- general behavior
- activity and visits update
- emotional and physical health
- achievements
- significant events
- family contact.

As part of this update the risk assessments and daily care plans are also provided.

6.6 HOME VISITS

As part of our family liaison work we aim to do Home Visits as often as is appropriate to the individual case and in keeping with the child's Placement Plan, but also ensuring that the minimum criteria of 3 visits per year is adhered to.

Once agreed Home Visits by the Personal Tutor and/or others should be arranged in liaison with the Case Co-ordinator as part of the casework, and noted in the main office diary.

A report of the visit should be completed within 48 hrs for filing and checked by the Case Co-ordinator who then ensures a copy is placed on the Main file.

6.7 REVIEWS

The Review is a milestone on the road of general progress and as such brings together different aspects of casework and practice. If casework has been kept in

good condition the preparation for a Review will be a simple process. If a report is required for a young person that you case co-ordinate:

- write the relevant deadlines in to your diary
- it is your role to ensure that the process runs smoothly
- check the Review Timetable published on the staff area of the Network so that you are aware of when the reports are required
- it is the Personal Tutor's role to write the PAN review report. It is your role to ensure the Personal Tutor does not struggle but is supported at a level they require
- when you are presented with the draft review report your Personal Tutor colleague will be looking for constructive advice both on the actual wording of the review and on any data and content
- firmly but supportively recommend some alterations where there may be contention or lack of clarity
- it is better to allow time to support a PT to make changes rather than rewriting it yourself
- ensure all the recommendations from the previous review have been addressed in the intervening period and that outcomes are clearly stated in the report
- encourage a positive expression of the child's progress so that even the more negative comments tend to indicate successes not yet achieved
- give as much time as possible to the Personal Tutor to sit and run through the Review Report
- be clear about what you are asking the Personal Tutor to do
- the Personal Tutor may need some help with rehearsing the presentation of the report
- a finished report must be handed to you as case co-ordinator 4 weeks in advance of the review. You must hand it to the RM 3 weeks and 4 working days in advance of the review
- available two weeks before the review so that the RM and Principal have time to see it, prior to it being posted out. At best this stage will just be an endorsement; at worst it should be a final honing of expression
- ensure that plenty of time is allowed for contact with the parents and for the Parent Report to be completed
- ensure that all documents are ready for reviews, including the Parent Review Report and the Pupil Review Report

Before the Review day:

- check on arrangements such as the parents' transport arrangements
- advise the Personal Tutor on external agencies and professionals who will need to be invited to the review and to know if they are attending
- ensure the main office is aware who needs to be invited and that the contact details for each are on the Essential Contacts list for each young person

In the Review Meeting:

- be prepared to make any comments that reflect your overview of the period since the last review and which will further inform the meeting
- make notes of decisions made and action to be taken so that these can be acted on before the report is published

7 LINE MANAGEMENT RESPONSIBILITIES

7.1 QUALITY ASSURANCE

Read and understand the Monitoring, Evaluation and Review Policy and Practice document

Quality Assurance is perpetuating the highest standards of excellence. The aims of quality control are:

- To achieve the highest standards which are suitable for the children in our care.
- To offer a better service to satisfy the expectation of children, parents/carers, staff team, external agencies and Placement Authority.
- To enhance Personal and Professional Development within the establishment.

This can be achieved by:

- Monitoring the measurable elements and identifying improvements to be achieved.
- Evaluating practice standards.

7.2 QUALITY OF SERVICE TO CHILDREN

Each DCM is responsible for a component of the residential setting. However all DCMs should ensure that:

- The basic care of the children as detailed in section 3.5 is of a consistently high standard.
- Children's care plans are being adhered to.
- All risk assessments are adhered to.
- 24 hr planning is facilitated.
- Children's' behaviour and well being is being monitored at all times including bedtime.
- Children are listened to and their expressed wishes taken into account.
- Evening and weekend activities are varied and of a high standard.
- Management agenda items are discussed, acted on and fed back to the team.
- All children wear clean and appropriate clothing.
- Children's' living accommodation is comfortable and welcoming.

As Case Coordinators who are providing quality service to the children, they will monitor casework once a month to ensure that the following objectives are being met:

- Each young person having regular PAN meetings, case coordinating meetings and reports are being written and filed as required.
- Home Visits are taking place in line with the care planning and reports are being written and filed in main files.
- Risk Assessments and Care Plans are updated and evaluated regularly.
- PAN planning structures are in place and of high quality
- Six monthly summary sheets are completed and filed in main files.

- Casework frequency monitoring sheet is updated regularly.
- contacts with other outside agencies are maintained and recorded
- Children's medical and psychological needs are being met, any referral is followed up.
- Finance updates/reviews are taking place at the required frequency and recorded appropriately.
- Young person's My Journey monthly meetings are being held at required frequency and are of a high quality

7.3 QUALITY OF SERVICE TO ADULTS

Read and understand the Staff Support and Development Programme Policy and Practice document

The line managers who are directly responsible for the individual staff's personal and professional development should ensure the following objectives are being met:

- Professional Development and Personal Support Meetings are taking place at the required frequency.
- Sessions are monitored and evaluated at regular intervals.
- Staff are supported in their completion of diploma courses.
- Staff are encouraged and supported to attend relevant courses.
- All courses are recorded, monitored and evaluated through PD sessions and where relevant feedback should be arranged to the staff team.
- Staff are supported in completing their professional core standards and annual confidence rating.

7.3.1 Personal Support Meetings

Colleagues are encouraged to use PSMs to explore personal and practice pressures, gain an understanding of their own feelings and responses to interactions at both child and colleague levels and to seek advice and appropriate safety-valving.

7.3.2 Stress

As line managers, it is vital that we make ourselves aware of the following factors:

- Helping colleagues to become aware of and acknowledge stress.
- Ensuring they are not associating stress with personal weakness and professional incompetence.
- Stress varies from person to person and is context specific.

Three major approaches to understanding stress:

1. To be aware of the pressures exerted on staff within the organisation; from the job itself, from the environment in which they work and from their relationships with their colleagues.
2. To be aware of staff reactions to these pressures.

3. To be aware of stress in terms of the interactions between staff and the organisation. We need to identify the pressures and reactions which staff define as stressful and help them develop strategies to reduce or prevent stress.

Sources of stress:

- Child misbehaviour
- Poor working conditions
- Time pressures
- Change in working conditions
- Role conflict and role confusion
- personal circumstances external to the working environment

Some of the coping methods:

- Personal resources - work strategies.
- Positive attitudes.
- Out-of-work activities.
- Interpersonal resources - talking with a partner/friend etc.
- Organisational resources.
- Community resources.
- Using the external independent Helpline offered by the company

7.4 YOUR COMMUNICATION SKILLS

Listening:

- Convey interest, attention and a degree of immediacy.
- Think about your non-verbal signals, such as posture, ideally facing the person with appropriate amounts of eye contact.
- Be sincere, empathetic and non-judgmental.
- Consider how you respond - tone, pace, style.
- Help keep the talker focused - prompts are often useful to bring the talker back to the main issues, e.g.; "It would help me to have more details on."
- Help the talker identify the real nature of the problem.
- Resist rushing in with solutions - "What do you want to do about it?" is often better than, "This is what you must do about it"

When talking:

- Resist monopolising the conversation.
- Stay focused, identifying the real issues under discussion .
- Resist taking over and overriding others contributions- don't rush in with solutions.
- Maintain interest - talk in and at a level appropriate to the listeners, the way it looks through the eyes of a staff member can be completely different to that of a manager.
- Avoid inflexibility, although staying focused is important you need to recognise when a legitimate and immediate concern needs a new direction in the conversation.

Effective communication - maintain a good oversight of recording and ensure the necessary recording has taken place in:

- Daily log
- Young People's diaries
- Restorative Approaches forms
- Daily Handover form
- Daily Planning form
- Daily Debrief form
- Medical Folder

Make clear decisions about what information needs to be communicated and at what level

- Management Team meeting level
- Team meetings
- Through a line manager
- Individually

Seek opportunities to gather information on issues; do not regard communication as a one way process from the top downwards.

Have a clear system of ensuring information gets passed on early enough and does not get forgotten, e.g. write a diary entry, write a memo to relevant staff, send an email, enter on handover sheet.

Be sensitive to the quality of interaction and possible hidden messages that can be communicated purely by the way in which you pass on/receive information.

Act as a strong role model for other staff.

Be professional, in all aspects of work. As a DCM you need to be everything that you expect other staff to be. For example a senior member of staff who is late on duty is in a tenuous position when faced with having to deal with a member of staff who is late. This applies across the spectrum from punctuality, dress, to time scales for documentation and tasks.

7.5 MANAGING CHANGE AND HELPING OTHERS MANAGE CHANGE

Consulting appropriately with staff about change is a necessary part of the process of helping them manage change. Much depends on the degree and extent of change as to what form and how much consultation is necessary. Information may be gathered by, group discussion in the form of a meeting, or individually across all or a section of the staff team, by discussion, enquiry or questionnaire. Good and early communication is necessary prior to the implementation of change. If for any reason timescales are shorter, then appropriate explanations as to why this is the case would be necessary.

Staff should be supported in a practice sense in dealing with and implementing the change (often people may have seemed to have grasped the concepts and thinking behind change but their operation in practice illustrates a wrong interpretation or

misunderstanding of the requirements). Equally some changes may put more onus on staff skills and unknown development needs can be exposed by change. Be positive and supportive in helping staff build up the appropriate levels of operation. Be sensitive to the demands of change on individuals.

7.6 RESOLVING STAFF CONFLICT SITUATIONS

For others:

- Be proactive - plan ahead, information gather, anticipate problems.
- Be decisive; don't leave things on the back burner if there is potential for the pot boiling over again.
- Make decisions about your approach and your role in facilitating the resolution of the situation - talk with individuals? Arrange a meeting? Use a restorative approach?
- Keep discussions free from verbal attacks and keep focused on the issues.
- Be consistent with all staff involved, don't be drawn into expressing opinions that might reflect a bias.
- Depersonalise the discussion and draw attention to professional requirements and respect for others.
- Remember it is possible that both people could be right, more often than not it is perceptions that differ.

With regard to yourself:

- Be non-aggressive in response, therefore acknowledging the strength of the other persons feelings.
- Focus on and address the issues involved.
- Don't be pushed onto the defensive.
- Hear the other person out avoiding interruptions.
- Respond to the facts and not what might be natural feelings and emotions (i.e., don't let them surface if they are there).
- Correct any facts that are inaccurate.
- If the grievance is genuine, then give an appropriate apology and address attention towards how things can be put right.
- If the grievance is unfair or based upon misunderstanding your motives, make this firmly but politely clear.
- Don't set out to score debating points, make the other person look foolish or rub salt in wounds.
- Whatever the basis of the grievance, thank the person for raising the matter.

Picking up an issue with an individual:

Don't steam in on your own without due consideration with a senior colleague if it is a major issue. Reflection and distance from an event can be useful in many ways. Minor points and issues can often be picked up throughout the flow of a day. These form part of an open and honest professional organisation, in other words those aspects that are simply helping people to do their job.

There will be issues that are of greater significance that arise through misunderstanding, awkwardness, ignorance or unprofessionalism that will come

under the remit of a senior member of staff to pick up. Often these situations will demand time, therefore it is important to choose the right moment to pick the issue up; (it is no use having a situation half resolved because a party has to leave to be elsewhere), equally interruptions can present problems therefore one also has to consider the venue.

Be as fully briefed as you possibly can before discussing the issues with the person concerned. It may be useful to speculate/anticipate explanations in your own mind beforehand in order to make sure there isn't anything that you might have overlooked (but don't get bogged down with this).

Don't wade straight into the discussion, as your final aspect of information gathering is to let the person concerned have their say first. Things may come to light through this explanation.

Again it is important to be measured, stick to the issues and have clarity in terms of outcome. If the whole thing proves to be unresolvable or going beyond your remit then refer it on to the Registered Manager or Principal.

7.7 MOTIVATING STAFF

- Give constructive feedback to colleagues when appropriate.
- Take opportunities to give positive feedback to colleagues.
- Lead by example displaying quality professional leadership.
- Do not be afraid to seek others' advice whatever their role and responsibility.
- Help staff understand the goals/vision that SES is aiming for.
- Help staff to feel valued and appreciated for their part in the team effort.
- Appropriate use of staff development.
- Make yourself aware of the work of the staff.
- Delegate responsibilities effectively.
- Your personal style and demeanour is important in everything you do.

7.8 PERSONAL SELF-EVALUATION

- Develop the willingness and ability to reflect on practice and seek feedback for yourself.
- Develop an open and approachable style.
- Invite comment and feedback at various levels (e.g.; individual, small group such as a shift team, use of self evaluation grids). Be very clear on what aspects of your operation you are requiring feedback.
- Role model honest personal reflection.

7.9 STAFF PERSONAL AND PROFESSIONAL DEVELOPMENT

Individual staff's personal professional development is the direct concern of their line manager. At all times through personal observation and discussion with other senior colleagues the line manager should be aware of individual staff needs in a developmental sense. Similarly it is the responsibility of each line manager to ensure that where significant points exist other senior colleagues are updated and informed in order that they may support and enhance development needs when and where appropriate.

The QUALITY of your involvement in Staff Development is what will produce the QUALITY in the TEAM.

The detail and thoroughness of your approach should be evident to staff.

The role and scope of staff development is well enough explained in the documentation on that subject. The objectives are significant:

- To recognise and support effective practice among staff leading to personal and professional development.
- To provide an opportunity to discuss professional development and give critical feedback and/or counselling when necessary.
- To identify and develop potential, talents and skills.
- To increase objectivity and fairness.
- To assist in planning.
- To assist and enable staff increasingly to undertake self-analysis.
- To identify areas for development and improvement.
- To identify obstacles to improving performance in the service.
- To identify training needs.
- To develop inter-staff dialogue.

The consequent areas, which may be covered in achieving these objectives, are given as follows but are not intended to be exclusive;

- Ongoing Personal Development Plan areas/tasks.
- Professional Core Standards.
- Basic physical care of the children.
- Personal organisation and management of time.
- Interpersonal skills with the children (motivation skills, intervention, control).
- Interpersonal skills with colleagues (individual, care team, teachers, TAs seniors).
- Recording and administration (individual programmes, casework, contact with families, review reports).
- Organisational skills (planning of activities, lessons, etc.)
- Interest and involvement in specific areas/projects in school.
- Reinforcing and supporting successful work.
- Handling stress.

Although line manager/client driven the whole idea of development is that the client takes gradually more and more responsibility for their own development as the line manager gradually fulfils more and more the role of facilitator and advisor/mentor.

7.10 PROFESSIONAL DEVELOPMENT PLANS

PDPs are the vehicle through which staff are enabled and empowered to steer their own development needs. To begin with staff will need your support in thinking out the detail of their plans even though they have clarity on the major issues.

Eventually our hope is that they will be able to construct more and more of their own development plan with your help in polishing it. Use your knowledge and experience to bring an overview to their work particularly in helping them break down the action points into manageable detailed steps. Ensure the monitoring and evaluating of plans is carefully thought out at their inception. Remember you will have to link carefully with the Avocet House aims and objectives in order to provide evidence that individual, team and organisational needs are met.

7.11 RUNNING A PROFESSIONAL DEVELOPMENT MEETING

During the Induction period there is a specific requirement around running development meetings and their content. Essentially you are required to ensure that staff have a full grasp of procedures, structures, systems and documentation.

The structure of the development session once outside the probationary period may well vary from time to time but it should fall in to two halves essentially:

- a. The PDP itself. This involves going through the plan line by line, discussing what has been achieved in meeting actions outlined, etc.
- b. Any other development issues the staff member wishes to raise outside the PDP.

7.11.1 The Difference Between Managing Staff and Working with Staff Development

Staff Development is not staff management.

If you need to address the working practice of a member of staff then that should be done outside development sessions. This is not to say that issues do not arise in development sessions that overlap a management issue but the essential difference is that you do not leave management issues to be dealt with through development but pick them up immediately through other channels. Overlap that occurs through development sessions will be brought about by the staff member themselves either unwittingly or deliberately, and because they are interested in working at that themselves through development support.

Staff management on the other hand is a process that you instigate yourself as a line manager and must be clearly separate from development. Where problems exist meetings should not be just an exercise in criticism, but must offer a constructive programme of advice and practical help.

7.12 PERSONAL SUPPORT MEETINGS

PSMs are client driven in their entirety, but in having benefits to the individual they also have a consequent benefit to the establishment. If used productively they should:

- provide an open agenda on any personal and professional issues
- provide a forum to address feelings aroused by working with people and children in stressful situations

- help senior colleagues to stay in touch with the quality and extent of support they should be providing
- provide a safe environment to “safety valve” issues
- be a relaxed occasion enabling supervisees to fully explore their ideas, feelings and attitudes.

7.13 PREVENTING CONFUSION BETWEEN PROFESSIONAL DEVELOPMENT AND PERSONAL SUPPORT

To prevent confusion between the two roles it is important that the two functions for an individual are handled by different people. The essential difference is in the fact that Personal Support is client driven in terms of the agenda of issues covered. Your role in Personal Support is one of another listening person rather than that of an active agent, unless that is required by the client in the way they wish supervision to be handled. Supervision is pastoral.

8 HOW DOES THE DIPLOMA LINK WITH YOUR ROLE

As part of your Role as a Deputy Care Manager you will be expected to complete the Level 5 Diploma, in line with the ‘Guide to the Children’s Homes Regulations including the quality standards’ (April 2015). Please read SES Staff Handbook entry.

9 APPENDICES

APPENDIX A

Delegation of Authority Policy and Practice document.

APPENDIX B

Registered Manager’s and Head of Care Job Descriptions

APPENDIX C

Self Monitoring Overview Example

SPECIALIST EDUCATION SERVICES

Delegation of Authority Policy and Practice

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1 INTRODUCTION

Traditionally the Registered Managers in residential homes have assumed total responsibility for their efficient and effective management at all times. Avocet House and Turnstone House both hold dual registration as a Residential Special School and as a Children's Home, therefore there is a Principal in overall charge.

However at each establishment it is considered good practice to increase the number of staff who are able to assume responsibility for 'day to day' management of the home. This policy is designed to ensure clarity among those assuming the role.

2 ROLES

2.1 TEAM LEADER

Team Leader status is achieved after successfully completing a period of time (not less than 4 months) as an acting team leader under the guidance of a Deputy Care Manager. Team Leader status is purely about competency in running a shift, but without many of the wider managerial responsibilities of a DCM. Even when holding Team Leader status a senior colleague is always available in person or via the telephone for support and advice.

2.2 DEPUTY CARE MANAGER

The Deputy Care Manager is the person(s) to whom the Registered Manager has delegated decision making in respect of the homes good management, for a specified period of time, but within the clear framework provided by its policies, practices, and structured environment. They also formally "deputise" for the Registered Manager. Even DCMs have access to the Registered Manager and/or the Head of Care in person or via the telephone for support and advice.

2.3 HEAD OF CARE

The Head of Care also has the full responsibilities of a Deputy Care Manager and fulfils that role in exactly the same way as other DCMs being directly responsible for the home's operation during any period of duty management. However the Head of Care has additional responsibilities over and above a DCM as can be seen from the job description attached as an appendix to this document. They co-ordinate all aspects of care and liaise with and support the Registered Manager in quality assurance. They share the "First Port of Call" responsibility with the Registered Manager.

2.4 REGISTERED MANAGER

The home's Registered Manager is responsible for the overall operation of the home and as such should be the ultimate point of reference for Team Leaders or Deputy Care Managers where doubt exists or advice is required. As with many aspects of home life Team Leaders and Deputy Care Managers should, before making major decisions, consult with the Head of Care, Registered Manager or

Principal in order to facilitate consistency and to avoid knee jerk, emotive or ill-informed responses.

3 SCOPE

This policy and practice document applies to all those members of staff undertaking the Team Leader and Deputy Care Manager role.

4 RATIONALE

Staff and children need, in a variety of circumstances, an easily available person as a point of reference, who has the authority to make decisions. Extending the number of staff who assume a traditionally senior management role provides staff with career development opportunities that might otherwise have been denied them, and allows senior staff to play a larger range of roles than would otherwise have been the case.

5 AIMS

The aim of duty managing is to provide for the efficient and effective 'day to day' management of the home in respect of:

- the good management, health, safety, and personal well-being of children,
- effective deployment of staff
- appropriate use of home resources,

and to raise awareness of problems by maintaining good communication and alleviating difficulties with resources.

6 EXPECTATIONS

All staff undertaking the role of duty managing should do so within the framework provided by the home's aims, objectives, policies and practices.

At all times either the home's Registered Manager or Principal should be consulted where any doubt about the above exists.

7 IMPLEMENTATION

Team Leaders and Deputy Care Managers should be aware that familiarity with all aspects of policy and provision, systematic planning, clear communication, the ability to take an overview, and good decision making ability are essential to the role being executed appropriately.

These roles necessitate:

- the considered deployment of staff,

- making effective and efficient use of home resources, and an appropriate use of those within the community,
- encouraging children to maintain socially acceptable standards of behaviour, and making provision for service user guidance and counselling as necessary,
- liaising with other professionals, external agencies, and parents/carers as appropriate,
- co-ordinating a recreational and social programme that engages children in an extended range of leisure pursuits, and
- ensuring that guidelines are given to those staff assuming responsibility for activities outside of the home.

It will be important to monitor:

- children's need for personal support
- staff need for additional support
- any improper absences,
- sanctions imposed on children,
- damage to the building or its fixtures, fittings and equipment which could effect children's and staff health and safety,
- staff and children's adherence to home routines, and
- the legitimacy of unknown persons in home

Team Leaders and Deputy Care Managers are responsible for all aspects of the home's operation during their period of duty management; this includes the deployment of staff, the management of children and the allocation of resources.

SPECIALIST EDUCATION SERVICES

Registered Manager

JOB DESCRIPTION

POST TITLE:	Registered Manager
RESPONSIBLE TO:	Principal
RESPONSIBLE FOR:	All aspects of care provision and 24hr learning in liaison with the Head of Education.
GRADE:	
POSTHOLDER:	

SES Ltd is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment.

TO BE RESPONSIBLE FOR ALL CHILD CARE FUNCTIONS

- 1.1 To lead by example and provide inspiration and motivation for others in order to create a shared culture and positive climate
- 1.2 To be conversant with, and work towards, fulfilling the establishment's Statement of Purpose in relation to the 'Guide to the Children's Homes Regulations including the quality standards', ensuring that the SES philosophy, ethos, aims and objectives are reflected in its organisation and practice.
- 1.3 To establish and monitor appropriate and adequate assessment, reporting and recording systems that maintain high quality standards of care in line with the establishment's Statement of Purpose in relation to the 'Guide to the Children's Homes Regulations including the quality standards', and develop quality assurance measures to ensure these standards are maintained.
- 1.4 To maintain good practice, be informed on current practice, and in liaison with the Principal, implement changes in accordance with developments in the child care field.
- 1.5 To maintain up to date knowledge of the statutory and procedural framework for residential care and communicate this to staff as appropriate.
- 1.6 To be conversant with and implement, the SES Directors philosophy and policies, and to make decisions in accordance with the Directors, Principal and Ofsted Inspection expectations for the home.
- 1.7 To take the lead role in developing and co-ordinating any family work arising from placement of a child.
- 1.8 To be conversant with and adhere to all procedures relating to child protection, health, safety and security, confidentiality and data protection, reporting all concerns to an appropriate person.

- 1.9 To act as the Lead Designated Person for Child (LDPCP), as outlined in the SES Safeguarding and Child Protection Policy and Practice Document.

TO PROMOTE GOOD CHILD CARE PRACTICE WITHIN THE HOME

- 2.1 To take the lead in developing and maintaining a nurturing, domestic environment that demonstrates positive unconditional regard for children without compromising appropriate caring boundaries for each young person that helps them make the transition from dependence to autonomy
- 2.2 To demonstrate good child practices in own direct work with children to provide a model for other staff members.
- 2.3 To co-ordinate, support and lead the childcare team with regard to standards of care in line with the National Minimum Standards for Children's Homes.
- 2.4 To develop ones own knowledge, practice, resources and style of leadership, which ensures open and participatory management and practice.
- 2.5 To ensure that each young person has a plan which reflects their care, education, social, emotional, cultural, therapeutic and health needs and that these plans are regularly reviewed and evaluated.
- 2.6 To ensure that full and complete casework records for young people are maintained and that sound decisions are made and carried out.
- 2.7 To contribute to the implementation and evaluation of specific programmes, which provides a framework for the effective management of individuals and group behaviour.
- 2.8 To clarify expectations in relation to maintaining XXX House in a clean and orderly condition.
- 2.9 To develop ways in which young people are consulted about the quality of care they receive.

TO BE DIRECTLY INVOLVED IN CASE CONFERENCES, REVIEWS AND PLANNING MEETINGS

- 3.1 To compile reports as and when necessary
- 3.2 To actively seek the views and opinions of children and provide a platform from which they can be heard.
- 3.3 To support other staff in compiling reports and encourage them to involve the children in reviews.
- 3.4 To attend and participate in case conferences/reviews/planning meetings as and when appropriate.
- 3.5 To be involved in planning for admissions and in planning exit strategies for children

TO ENSURE THAT SPECIFIC ADMINISTRATIVE TASKS ARE PERFORMED ACCURATELY

- 4.1 To be responsible for all administrative functions/operations of the home
- 4.2 To monitor and assist other staff members in carrying out their administrative duties.
- 4.3 To effectively manage and monitor all financial budgets allocated in the home.
- 4.4 To be involvement in the recruitment and retention of staff
- 4.5 To ensure adequate staffing levels that meet the needs of XXX House
- 4.6 To be responsible for preparing working rotas which utilise staff resources most effectively in line with the needs of both children and staff.

- 4.7 To monitor closely the fabric of the building (including fixtures, amenities and grounds) and taking remedial action where necessary.
- 4.8 To monitor, collate and evaluate incidents involving ground recovery holds and provide data to the Principal and TT sub-committee on an 8 week rolling cycle.

TO MANAGE THE STAFF TEAM IN A MANNER THAT MAXIMISES THEIR OUTPUT AND ENABLES THEM TO ACHIEVE THEIR POTENTIAL

- 5.1 To play a lead role in the Staff Support and Development Programme to enhance team performance by ensuring the provision of induction, supervision, support, NVQ assessment, training and appraisal; and to respond to underperformance.
- 5.2 To develop a management style which balances the need to exercise control and give direction with the need to offer staff the opportunity to contribute to decision making.
- 5.3 To identify training needs within the team and participate in enabling these needs to be met.
- 5.4 To prepare and lead staff meetings.

GENERAL RESPONSIBILITIES

- 6.1 To contribute to the strategic and business planning of the service, the development of policies, procedures and implementation of quality assurance systems.
- 6.2 To maintain clear, effective and impartial communication between education and care staff, and the senior management team.
- 6.3 To monitor objectively the quality of relationships between children, between staff and children, and between staff, with the constant aim of improvement.
- 6.4 To discriminate effectively between those decisions which can be deferred and those that need immediate attention.
- 6.5 To ensure good relationships with near neighbours and the wider community
- 6.6 To co-ordinate and participate in any out of hours on-call service.
- 6.7 To perform sleeping-in duties as required.
- 6.8 To undertake any other duties appropriate to the post as may from time to time be required by the Principal.

WORKING TIME

This job description allocates responsibilities and duties but does not direct the particular amount of time to be spent on carrying them out and no part of it may be so construed. There are no definitive working time arrangements for the Registered Manager role however in allocating time to the performance of responsibilities and duties the postholder must adhere to the company's policies and plans on the use of time and as such requires a minimum of 37 hours per week. This is a management post and is paid at an annual salary not an hourly rate.

REVIEW

This job description will be reviewed at least once per year and may be subject to amendment or modification at any time after consultation with the postholder through the company's Staff Support and Development Programme. It is not a comprehensive statement of procedures and tasks but sets out the main expectations of the company in relation to the postholder's professional responsibilities and duties.

SPECIALIST EDUCATION SERVICES

Head of Care

JOB DESCRIPTION

POST TITLE: Head of Care
RESPONSIBLE TO: Registered Manager
GRADE:
POSTHOLDER:

SES Ltd is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment.

GENERAL RESPONSIBILITIES:

- 1.1 To lead by example and provide inspiration and motivation for others in order to create a shared culture and positive climate
- 1.2 To be conversant with, and work towards, fulfilling the Statement of Purpose of XXX House in relation to the 'Guide to the Children's Homes Regulations including the quality standards' (April 2015), ensuring that the home's philosophy, ethos, aims and objectives are reflected in its organisation and practice.
- 1.3 To maintain good practice, be informed on current practice, and in liaison with the Registered Manager, implement changes in accordance with developments in the child care field.
- 1.4 To maintain clear, effective and impartial communication between education and care staff, and the senior management team.
- 1.5 To monitor objectively the quality of relationships between children, between staff and children, and between staff, with the constant aim of improvement.
- 1.6 To liaise with staff of all disciplines as necessary to promote co-operation within the home and ensure minimum disruption to the smooth running of the establishment.
- 1.7 To be conversant with and adhere to all procedures relating to child protection, health, safety and security, confidentiality and data protection, reporting all concerns to an appropriate person.
- 1.8 To act as the Deputy Lead Designated Person for Child (LDPCP) in the absence of the Registered Manager, as outlined in the SES Safeguarding and Child Protection Policy and Practice Document.

MANAGEMENT RESPONSIBILITIES:

- 2.1 To hold financial responsibility for designated areas of the home's budget
- 2.2 To be a member of the Senior Management Team and deputise for the Registered Manager in their absence with regard to their overall responsibilities.
- 2.3 To attend weekly Communications Meetings in a liaison and advisory capacity.
- 2.4 To chair DCM and whole Care Team Meetings where designated.
- 2.5 To be responsible for the planning and administration of rotas, including alterations for shift cover as a result of staff absence.

- 2.6 To offer formal Supervision to members of the staff team as delineated in the Staff Support and Development Programme.
- 2.7 To offer Line-Management within the Staff Support and Development Programme for Child Care Staff.
- 2.8 To hold a responsibility for the general organisation and operation of the home on agreed designated shift times.
- 2.9 To play a lead role in the training and induction of Child Care Staff.
- 2.10 To develop and maintain a monitoring and evaluation role with regard to the general operation of the home and where necessary specific children, in liaison with, and support of, the Registered Manager.
- 2.11 To monitor and support the work of Deputy Care Managers, (and where appropriate Personal Tutors and Link Tutors) in all liaison work with families, carers, significant others and placement agencies, particularly as part of the home's referral and admission procedures.
- 2.12 To monitor, support and advise Deputy Care Managers on their case co-ordinating role.
- 2.13 To monitor and evaluate the records of pupil progress and the decisions made and carried out for individual children.
- 2.14 To monitor the effectiveness and appropriateness of the day to day recording of children's progress and behaviour.
- 2.15 To take a lead role in developing and running "Voice of the Child" meetings.
- 2.16 To lead and co-ordinate evaluation of the recreational and social programmes that engage children in constructive, enterprising and socially extending leisure activities both in the evening and at weekends, ensuring the right balance of activity and relaxation on specific evenings.
- 2.17 To co-ordinate and have oversight and supervision of volunteers and students of child care/social work placed at the home for periods of practice or observation.
- 2.18 To monitor the use of children's activity and personal allowance money.
- 2.19 To be responsible when on shift for the co-ordination of all medical aspects of the running of the home with regard to children.
- 2.20 To monitor Child Protection issues as described in the Avocet House Child Protection Policy and Practice document.
- 2.21 To be fully conversant with other management roles and responsibilities, and other areas of specialism within the home and school so as to be able to liaise and work effectively with colleagues.
- 2.22 To be part of an admission panel that considers the referral and placement of children at Avocet House.
- 2.23 To have detailed knowledge of Local Authority Services, placing agencies and how they are involved with the home.
- 2.24 To lead a multi-disciplinary team and "sleep-in" as per agreed rota.
- 2.25 Perform any other task that the Registered Manager or Principal may reasonably request.

WORKING TIME:

This job description allocates responsibilities and duties but does not direct the particular amount of time to be spent on carrying them out and no part of it may be so construed. There are no definitive working time arrangements for the Head of Care role however in allocating time to the performance of responsibilities and duties the postholder must adhere to the company's policies and plans on the use of time and as such requires a minimum of 37 hours per week. This is a management post and is paid at an annual salary not an hourly rate.

REVIEW:

This job description will be reviewed at least once per year and may be subject to amendment or modification at any time after consultation with the postholder through the company's Staff Support and Development Programme. It is not a comprehensive statement of procedures and tasks but sets out the main expectations of the company in relation to the postholder's professional responsibilities and duties.

At year start diary:

- Review Date and associated deadlines – and when due to you from PTs
- Reg 44 updates – monthly reminder early enough in month
- All PDM's dates through the year
- All PSM dates through the year
- All regular weekly meetings
- Schedule and sub-committee meetings

Golden rule: Disruptions and postponements are re-scheduled immediately or as soon as possible

Weekly Must Do Activities

Shift Planning – looking ahead

Core Monitoring Activities:

Casework – Plan a structure to work your way around various aspects