



## **9. Leadership and Management**

## Legislation

- **The Children’s Homes (England) Regulations 2015**
- **Health and Social Care Act 2008, Section 20 Regulations**
- **Health and Social Care Act 2008 (Regulated Activities) Regulations 2010- Regulations 6 and 7**
- **Safeguarding Vulnerable Groups Act 2006**

## Practice Evidence

<b>Inspection Body</b>	<b>Evidence</b>
<b>Ofsted</b>	<b>Senior Management Team Meeting Minutes, Financial Reports, Financial Agreements, HR Records, Regulation 44 and 45 Reports, Inspection Reports, Education Subcommittee Meeting Minutes, Education Team meeting Minutes</b>
<b>CQC</b>	<b>Senior Management Team Meeting Minutes, Financial Reports, Financial Agreements, HR Records, Regulation 44 and 45 Reports, Inspection Reports</b>

## **Reference**

**9.1- Registered Manager**

**9.2- Organisational and Strategic Plan**

**9.3- Review of Premises**

**9.4- Monitoring Quality**

**9.5- Finance**

**9.6- Access to Records**

**9.7- Delegated Authorities and Notifications**

### **9.1- Registered Manager**

Dr Karen Parish is the Registered Manager. She is also the Clinical Director and a Registered Social Worker. Karen holds a level 5 qualification in leadership for Health and Social Care for Children and Young Peoples Services. In addition to this the Assistant Director (Care) and Deputy Head of Care also hold the level 5 award or equivalent. The Head of Business Operations holds an NVQ Level 5 award and an NVQ Level 7 in Strategic Management and Leadership.

#### **Requirements of the Registered Manager**

- The Registered Manager should demonstrate that they :
  - - Are of good character
  - - Are Physically and Mentally able to undertake the job
  - - Have the qualifications, knowledge and experience to manage the regulated activity
  - - Have had the appropriate checks (schedule 3 of Health and Social Care Act 2008 (Regulated Activities) Regulations 2010
  - - Registered with the appropriate Professional Bodies
  - - Can Safeguard from abuse
  - - Have an understanding of equal opportunities and a respect for diversity and Human Rights
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#### **Notification of Changes**

The Registered Manager will notify Ofsted and the Care Quality Commission in writing of any changes in respect of:

- Partnership arrangements
- Address
- CEO or registered manager
- Liquidation/bankruptcy
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#### **Notification of Absences**

Any Absence of the Registered Manager will be managed as follows:

- Annual leave/ short term illness - Duty Officer to hold Management responsibility.
- Long term absence/ illness (28 days or more)- Ofsted and Care Quality Commission to be notified and Trustees to identify acting manager, this will be someone who holds the level 5 Management award, or equivalent. The Registered Manager will notify all parties on their return to work.
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- Death of a Registered Manager- Ofsted and Care Quality Commission to be notified and Trustees to identify acting manager, this will be one of the SMT who holds the level 5 Management award, or equivalent. The Trustees will then look at recruiting into the position. Ofsted and CQC will be notified of successful recruitment.

### **9.2 Organisational and Strategic Plan**

There is a ten year Organisational and Strategic Plan. This is formally reviewed after five years, in consultation with Staff, Trustees and the Finance and Planning Group. There is also an annual plan which fits into this ten year strategy. This is reviewed by the Trustees and the Senior Management Team.

The annual plan consists of:

- Mission statement including charitable objective and values of the Trust
- Annual summary of Inspections and Research
- Annual review of present position
- Service development plan (Glebe House and the Eastwood Transitions Foundation)
- Review of the Trusts ten year strategic plan
- Annually revised strategic plan
- Trusts annual targets
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### **9.3- Review of Premises**

The Registered Manager undertakes an annual review of the suitability of the premise as part of the Statement of Purpose review. This includes reviewing the locality risk assessment and undertaking a review of the premises.

In addition there is a site maintenance plan which is reviewed annually. As part of the Regulation 44 Independent Visits the inspection includes a review of premises on a monthly basis.

### **9.4 Monitoring Quality**

#### **Senior Management Meetings**

The Senior Management Team meet fortnightly to monitor the quality of the service. This is an opportunity to explore issues and look at service development. A standard item on the agenda for this meeting is a critical incident review, this is an opportunity to review any areas of concern and implement plans to reduce further issues.

#### **Managers' Meeting**

There is a managers' meeting fortnightly. This meeting includes monitoring written record as well as service developments.

#### **Regulation 44 Visits - Independent Visitor**

Glebe House arrange for its home to receive monthly visits from an Independent Person from the Home. These visits are an on-going process that identify where we are at any given point in time and provides a potential basis in moving forwards. The visits should usually be unannounced but can be announced if it is necessary to arrange to meet a particular person.

The visit will be for a minimum of one hour. The person should complete a written report of the visit, outlining recommendations for improvement, the report should be shared with the Registered Manager, with the opportunity to make comment e.g. if there is disagreement with the comments and recommendations.

The report is sent to the Registered Manager to respond to and is available for Staff to read.

If there are any issues of concern, the Line Manager should take action to address them. A copy of this report is sent to **Placing Authority**, if requested, and to the **Regulatory Authority** as required. The person undertaking the visits may undertake specific checks and have access to what records they see fit. This will also focus on particular themes or issues including the following:

- Meet and talk to young people and staff of the home to ascertain their views, comments and any complaints about the running of the home.
- Read the Handover File, records of Restraints, Incidents, reports of Notifiable events.
- Checks any of the disciplinary measures and use of restraint in the home.
- Read the records of Comments, Representations and Complaints and (Child Protection Referrals), commenting on the frequency and type made and whether they appear to have been dealt with adequately.
- Read and comment on the record of Children's and Staff Meetings, or other methods used by the manager to consult the children and staff, held in the home. The person should also check that staff supervision have taken place as required.
- Check on the physical condition and decoration of the home, including the children's bedrooms.

#### **Regulation 45 Reports**

Every six months, the Registered Manager must undertake a review of the performance of the home and quality of service provided.

#### **Trustee Meetings**

The Trustee body meet six times a year, summary reports on the operation of the service are produced for these meetings. In addition to these meetings the Trustees have responsibility as the Board of Governors of the School. There are regular Education Sub Committee meetings between the Chair of Governors, Head of Education and the Registered Manager.

### **9.5- Finance**

#### **Financial Position of the Trust**

The Director of Finance and Business Planning and is responsible to Trustees to ensure that all aspect of the administration and finance of Glebe House is run on a professional, ethical, legal and prudent manner. He is responsible to the Trustees for the financial stability and viability of the Trust to ensure the aims of the Statement of Purpose and its objectives are properly resourced.

The annual accounts of the Trust will be independently audited each year and copies filed with Companies House and Charity Commission and will be available upon request by the Commission together with any other relevant financial information to ascertain the viability of Glebe House. Financial Summaries are presented to Trustees at every Trustee meeting. In view of our high degree of vulnerability of our income from fees, the trustees believe that, in order to manage the charity efficiently the equivalent of nine months expenditure should be held as free reserves.

The Director of Finance and Business Planning will be responsible for ensuring that all relevant insurances in respect of Public Liability, Employers Liability and to cover the death, injury, public liability, damage or other loss and will have all documents available for inspection.

The control of Petty Cash is the responsibility of the Director of Finance and Business Planning and the day-to-day control will be delegated to the Finance Officer who will both hold and be accountable for floats. All petty cash must be signed for by staff and for amounts above £10 must have a receipt verifying expenditure.

The Trust has detailed financial controls and all financial transactions must be in accordance with this document.

### **Fees**

Glebe House is a non-profit organisation. Fees are fully inclusive and are set at the time of referral for the duration of the placement. Funding for placement comes from statutory services such as Social Care, Health and Education. Glebe House do not permit service users to self-fund as this presents a conflict of interest because of the specialism of the service. Glebe House are a recognised Circles provider with Circles UK. The Quaker roots to both Glebe House and Circles UK mean that there is significant overlap in the underpinning principles behind both organisations.

The aim of the partnership is that, where appropriate, young people when leaving Glebe House will have the opportunity to be a member of a Circle enabling them to have support and guidance through this transition phase. This service is free at point of delivery, subject to successful completion of the Programme.

### **9.6- Access to Records**

#### **Placing Information in the Confidential Section of a Child's File**

Certain information held on children should be placed in the confidential section of their file; such information would not normally be accessible to the child.

Any decision to place information or material in the confidential section must be taken by the Clinical Director.

Before giving approval the Clinical Director must be satisfied that one of the following apply:

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- That there is a serious risk of injury to the child or others if the information is disclosed;
- That an offence may be committed if the information/material was accessible to the child;
- That there is a legal requirement, for example, in relation to Adoption Records;
- That there is a Court Order or Direction in force in relation to the information/material

Where the author/originator of a report or correspondence requests that it should not be shared with the child, the Clinical Director must come to a decision about whether it should

be placed in the confidential section of the child's file. In coming to a decision the Clinical Director must consult the author/originator and the child's social worker.

The decision to place the record correspondence (or not) must be communicated to the author/originator and the child's social worker; and the Clinical Director must ensure that a cross referencing note is placed in the main body of the file, or the location where it would normally be kept, so that it may be found/accessed when required.

Once placed in the confidential section the information may only be disclosed with the manager's approval, in consultation with the author/originator and the child's social worker.

All disclosures must be noted at the front of the confidential section of the file. Where information/materials are too bulky to be held in the confidential section of the child's file, they may be kept in another secure location, as agreed by the manager, and a note placed in the confidential section stating where it may be found.

### **Children Gaining Access to their Files/Records**

Except for information/material held in the confidential section of their files and third party information, children have the right to see records held on them, and in their files, and to read and comment on them, in accordance with Data Protection Law.

Before records or files are shown to children, consideration should be given to the likely effect of sharing the information. However, all information contained outside the confidential section is normally accessible. If in doubt or if there are concerns about the likely effect on the child, the supervisor or manager must be consulted.

Should staff need to share information provided by previous carers or third parties they are strongly advised to ensure that they:

Read the records/reports beforehand;

Speak to the authors if possible;

Collate the records in chronological order;

Give thought to what questions the young person may ask; and/or possible responses that the young person may make;

And/or what other information may be required.

A note should be placed on the daily Handover each time a child has access to records or his file.

### **Changing a Record**

If a child claims that information contained in the record/file is inaccurate, incorrect or misleading about a matter of fact, he may ask for it to be corrected or changed.

Records must be changed where an opinion/assumption has been expressed on the basis of inaccurate or incorrect information.

The originator should make any changes. If there is disagreement between the originator and the child, the Registered Manager should make a decision on whether or how the record should be amended.



This may result in the original record remaining the same and an additional record of the child's views being made.

### **9.7- Delegated Authorities and Notifications**

The following lists all the delegated authorities in the Home/Company, including matters that must be notified under Schedule 5 of the Children’s Homes Regulations.

It summarises the senior managers who must be notified or authority must be sought from – assuming that the Registered Manager will usually be notified.

Normally, notifications to outside agencies will be made by senior management unless procedures state otherwise e.g. in relation to child protection concerns where there is a concern that the senior manager is implicated.

Schedule 5 Notifications are highlighted in this way **Schedule 5 Notification**

#### **Referrals, Admissions and Discharges**

The Senior Manager(s) who are the placement, Transfer or Discharge of a Child. In the Referrals procedure, referred to as a Designated Manager (Admissions): Will Glistler, Referrals Manager.  
In the Leaving the Home procedure, referred to as Designated Manager (Transfers): Ray Hampford (Transitions Manager).

**Additional notifications to external agencies:** If the child is at Key Stage 4 (years 10 or 11), a senior manager in the placing authority must be consulted. In all cases, the child’s Independent Reviewing Officer (IRO) must be consulted, unless there is an emergency, in which case the IRO must be consulted as soon as possible after the move.

#### **Absent/Missing Children**

**Schedule 5 Notification if a Child is missing:** The Senior Manager(s) who must be notified if a Child is absent for a prolonged period (see procedure for timescales) referred to as a Designated Manager (Absence): Anil Kalbag (Head of Quality Assurance).

**Additional notifications to external agencies:** The Police and Placing Authority must be notified. If the child persistently goes missing, his/her Independent Reviewing Officer (IRO) must be notified.

#### **Countering Bullying**

The Senior Manager(s) who must be notified if staff are not happy with the way in which the Home’s Managers deal with concerns raised by them or matters are serious/concern the Home’s Manager. In the procedure, referred to as Designated Manager (Confidential Reporting): Paul Hodgkin (Clerk to Trustees).

**Additional notifications to external agencies:** Matters can be taken to the agency “Public Concern at Work”.

#### **Drugs/Solvents**

The Senior Manager(s) who must be notified if a Child has persistently or seriously been engaged in the taking or possession of controlled drugs. In the procedure, referred to as Designated Manager (Drugs): Karen Parish (Clinical Director).

**Additional notifications to external agencies:** The Placing Authority.

### Self Harming

The Senior Manager(s) who must be notified if a Child has persistently or seriously self-harmed. In the procedure, referred to as Designated Manager (Self Harming): Karen Parish (Clinical Director).

**Additional notifications to external agencies:** The Placing Authority.

### Police

#### Schedule 5 Notifications

The Senior Manager(s) who must be notified if any incident necessitates calling the Police or Emergency Services (e.g. Fire Brigade, Ambulance etc.) to the Home, referred to as Designated Manager (Police Incident): Karen Parish, Registered Manager.

**Serious Offence:** The Senior Manager(s) who must be notified if there is an allegation that a Child accommodated at the Home, has committed a serious offence, referred to as Designated Manager (Serious Offence): Karen Parish, Registered Manager.

**Additional notifications to external agencies:** The Placing Authority.

**Additional notifications to external agencies:** The Placing Authority and Regulatory Authority must be notified.

### Representations and Complaints

**If there is any serious complaint about the Home or anyone working there it is a Schedule 5 Notification.** The Senior Manager who receives/is notified of formal complaints, appoints Investigating Officers, receives recommendations from the investigation and appoints Appeals Panel, referred to as Designated Manager (Complaints): Anil Kalbag (Head of Quality Assurance).

**Additional notifications to external agencies:** If the complaint is serious, the Placing Authority and Regulatory Authority must be notified/consulted.

### Allegations Against Staff Procedure and Child Protection Referrals

#### Schedule 5 Notifications

The Senior Manager(s) who must be notified if an allegation of mistreatment has been made against a member of staff and/or a Child Protection Enquiry is instigated. In the procedure, referred to as Designated Child Protection Manager Karen Parish, Registered Manager.

#### Additional notifications to external

**agencies:** The Regulatory Authority, Placing Authority. In consultation with LADO, consideration should be given to notifying The Disclosure and Barring Service.

### Confidential Reporting

The Senior Manager who staff can go to if they are not satisfied that a matter has been dealt with appropriately or the matter concerns their own line manager, referred to as Designated Manager (Confidential Reporting): Karen Parish, Registered Manager.

#### Additional notifications to external

**agencies:** If the complaint is serious, the Placing Authority and Regulatory Authority must be notified/consulted.

### Grievances

The Senior Manager(s) who must be notified if a member of staff wishes to raise a grievance about the Home's Manager or wishes to make an appeal about the decision the Home's Manager has made. In the procedure referred to as Designated Manager (Grievances): Jeanette Hurworth (Head of Business Operations).

#### Additional notifications to external agencies: None.

### Gift Giving and Receiving

The Senior Manager who approves the giving or receipt of gifts by staff, referred to as Designated Manager (Gifts): Karen Parish (Clinical Director).

#### Additional notifications to external agencies: None.

### Disciplinary Procedures

**The Senior Manager who will:**

**If there are allegations of abuse or a Child**

<ul style="list-style-type: none"> <li>• agree suspensions of staff.</li> <li>• agree to start formal disciplinary investigations/process;</li> <li>• agree Outcomes/Sanctions</li> <li>• appoint managers to conduct disciplinary hearings;</li> <li>• decide on the actions/sanctions will be taken after hearings or appeals have been conducted;</li> <li>• agree dismissal/terminations of contracts.</li> </ul> <p>Referred to in the procedure as Designated Manager (Disciplinary Procedures): Jeanette Hurworth, Head of Business operations.</p> <p><b>Schedule 5 Notification:</b> If a member of staff is dismissed or moves (e.g. retires or hands in their notice) as a result of an allegation/ enquiry of mistreatment or abuse against a Child*, The Senior Manager who must make the decision, referred to as Designated Manager (Disciplinary Procedures): Jeanette Hurworth, Head of Business Operations.</p> <p>*In Schedule 5 this is referred to as "Referral to the Secretary of State pursuant to section 2(1)(a) of the Protection of Children Act 1999(a) of an individual working in the Home".</p>	<p><b>Protection Enquiry is started</b>, the Placing Authority, Local Authority Designated Officer (LADO), Regulatory Authority and Independent Safeguarding Authority.</p> <p><b>If a member of staff is dismissed or moves (e.g. retires or hands in their notice) as a result of an allegation/ enquiry of mistreatment or abuse against a Child*</b> the following agencies must be notified: Regulatory Authority, Placing Authority. In consultation with LADO, consideration should be given to notifying The Disclosure and Barring Service.</p> <p><b>Additional notifications to external agencies:</b> The Regulatory Authority, Placing Authority. In consultation with LADO, consideration should be given to notifying The Disclosure and Barring Service.</p>
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<b>Health and Safety</b>	
<p>The Senior Manager with overall responsibility for Health and Safety in the company referred to in the procedures as Designated Manager (Health and Safety) is Nigel Roberts, Head of Safety and Site Services. The post title and name of the manager responsible for Health and Safety in the Home, and Employee Safety Representative: Nigel Roberts (Head of Safety and Site Services).</p>	<p><b>Additional notifications to external agencies:</b> If there are allegations of abuse or a Child Protection Enquiry is started, the Placing Authority, Local Authority Designated Officer (LADO), Regulatory Authority and Disclosure and Barring Service.</p>

<b>Accidents (including death of a child or employee, serious illnesses, outbreak of any infectious disease, accidents or dangerous occurrence)</b>	
<b>If there is an outbreak of an infectious</b>	<b>Additional notifications to external</b>

**disease or a serious illness/accident sustained by a Child it is a Schedule 5 Notification**

The Senior Manager receives/is notified of serious illness, outbreak of any infectious disease, accidents or dangerous occurrence referred to as Designated Manager (Serious Health Incident): Nigel Roberts (Head of Safety and Site Services).

**agencies:** The Placing Authority, the Regulatory Authority, Health and Safety Executive Incident Contact Centre and Health Authority in the area where the resident is living.

**Notifying the Regulatory Authority/HSE**

**The Regulatory Authority**

Where a notification is required to the Regulatory Authority e.g. Ofsted, please go to the Ofsted website and follow links for **Notification of Serious Childcare Incident**.

**Health and Safety Executive**

For information on notifying the Health and Safety Executive Incident Contact Centre:

T: 0845 300 99 23

E: [riddor@connaught.plc.uk](mailto:riddor@connaught.plc.uk)

[www.hse.gov.uk/riddor/](http://www.hse.gov.uk/riddor/)