

**STANDARDS FOR YOUNG
ADULTS SUPPORTED
ACCOMMODATION PROJECTS
IN NORTHERN IRELAND**

September 2012

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1. Introduction

This document sets out the minimum standards for young adults supported accommodation projects that provide housing support, care and accommodation. These projects offer an alternative to mainstream care placements as described under Article 27 (2) of the Children (NI) Order 1995 to children aged 16 and 17 as well as to vulnerable adults aged 18 – 21+ where it is assessed that their needs can best be met in a living environment that affords age and developmentally appropriate experiences of preparation for adult life. Such projects by their nature also recognise the need for an appropriate level of supervision and continuing care. The standards set out the arrangements, services and procedures that need to be in place and implemented within young adults supported accommodation projects to ensure the delivery of high quality, safe and supported living environments for the young adults who reside within them.

2. Background

The development and introduction of standards for young adults supported accommodation projects is the culmination of extensive work undertaken to examine the needs of the young people who have been placed in certain types of “unregulated” arrangements, models of provision being used, consultations with HSC Trusts, providers of these services and those with expertise in and with responsibility for housing including NIHE colleagues. The standards have been informed by practice and developments in England and Scotland who face similar challenges in creating more flexible and safe arrangements to support vulnerable young adults in transition to adulthood.

Following the implementation of the Children (Leaving Care) Act 2002 in 2005 and based on evidence that a number of looked after young people aged 16 and 17 were living outside of “regulated” care placements in a range of alternative accommodation projects in the community, DHSSPS in collaboration with Supporting people / NIHE and providers requested that RQIA undertake an overview of the type of accommodation in which “eligible” and “relevant” young people and other homeless 16 and 17 year olds were residing. The findings of this overview highlighted significant issues relating to the type and quality of accommodation in which young people were living. All of the supported accommodation projects examined and which catered for these young people were small in scale and being provided by voluntary organisations. Projects were funded by

NIHE/Supporting People with additional funding from HSC Trusts. The overview report recommended that:

- Strong consideration be given to the registration, regulation and monitoring of Leaving and After Care Services and its accommodation sector;
- Standards should be drafted to assist providers and HSC Trusts in the provision and monitoring of supported accommodation; and
- The provision of jointly commissioned and only commissioned provision be accessed by care leavers.

Further examination of the basis for certain looked after children aged 16 and 17 residing outside of regulated care placement arrangements was undertaken through the Regional Review of Residential Care, DHSSPS. This analysis pointed to the limitations of mainstream residential care in meeting the needs of some older adolescents. Particular factors noted included:

- Challenging, complex and testing out behaviours which are beyond the management and capacity of mainstream residential/foster care;
- Admission to care of older adolescents who have little investment in buying into mainstream care provision;
- Expressed choice and preferred option of some young people to move outside of the constraints of current care placements to experience a greater sense of freedom and test out independence;
- High risk behaviours that put younger residents at risk and which can no longer be managed/tolerated within residential units.

There was a collective view from HSC Trusts and other stakeholders that the needs of some older adolescents could best be met through a hybrid model of supported living that offered “move-on” from mainstream care placement provision. Such a model should incorporate best practice elements identified within those supported accommodation projects that were examined as part of the overview exercise. It was further acknowledged that such a model should complement rather than replace any existing models of care. The model, incorporating housing support and continuing care for those young people aged 16 and 17 and vulnerable adults aged 18 – 21+, should become an integral part of the overall

continuum of provision available to this age group to assist them in their transition into adulthood.

The development of standards for young adults supported accommodation projects is in keeping with the requirement on HSC Trusts to comply with clinical and social care governance arrangements.

3. Legal Context

The Children (NI) Order 1995 specifies under Article 27 (2) the living arrangements in which looked after children can be placed. These arrangements, such as residential care and foster care, are governed by standards and associated regulation. Article 27 (2) (f) also allows for the provision within legislation of “other” arrangements that “seem appropriate to the authority and comply with any regulations made by the Department”. The placement of young people in young adults supported accommodation projects and in other individual arrangements has operated under this legislative provision. In light of the placement and use of young adults supported accommodation solely for children aged 16 and 17 and for vulnerable young people aged 18 – 21+ DHSSPS stated its intention to introduce and establish regulation and associated standards to govern this sector to ensure proper safeguarding.

The Children (Leaving Care) Act 2002 was implemented in September 2005. This Act introduced new and enhanced duties on Trusts in relation to financial responsibilities for 16 and 17 year olds and furthermore held as one of its core objectives that children falling within the entitlements of the Act should only leave care when they are ready and prepared to do so. The Act therefore sought to stem any potential for young people to leave care prematurely or for Trusts to abdicate responsibilities, including financial responsibilities, to these young people.

The Act also identified that certain children aged 16 and 17 year olds would cease to be looked after before reaching 18 years of age and consequently where they were unable to return to family would require accommodation in the community. For these situations the Act specifies that for this category of “relevant” young people, the Trust must ensure placement in “suitable” accommodation unless the Trust is satisfied that their welfare does not require it. Article 34C(10) of the Children (NI) Order 1995 and regulation 10 (2) of the Children (Leaving Care) Regulations (NI) 2002 define suitable accommodation as accommodation:

- (a) which so far as reasonably practicable is suitable for the young person in the light of his or her identified needs, including health needs;
- (b) in respect of which the responsible HSS Trust has satisfied itself as to the character and suitability of the landlord or other provider; and
- (c) in respect of which the responsible HSS Trust has so far as reasonably practicable taken into account the young person's:
 - (i) wishes and feelings; and
 - (ii) his or her educational, training or employment needs.

The development of The Health and Personal Social Services (Quality Improvement and Regulation) (Northern Ireland) Order 2003 established the Regulation and Quality, Improvement Authority. This independent body has the responsibility for and power to regulate agencies and establishments within the HSC Trusts and independent sector. Article 38 of the Order confers powers on the Department of Health, Social Services and Public Safety to prepare, publish and review statements of minimum standards applicable to any service or establishment, which it feels appropriate.

Providers of young adult supported accommodation projects should continue to ensure that they remain compliant with the requirements of the Quality Assessment Framework administered under Supporting People, NIHE. These standards must also be considered alongside relevant legislation, policy and procedures including Child Protection Standards, Vulnerable Adults Policy, Agreed Standards and Criteria for Information Sharing for Agencies working with Families and Children in Northern Ireland, 2009 and the Northern Ireland Safeguarding Policies and Procedures 2010.

HSC Trusts must continue to ensure that they remain compliant with Looked After Arrangements as laid out in the Children (NI) Order 1995, Departmental Guidance Volumes 3 and 4 of the Children Order series and Volume 8 on Leaving and After Care regarding the placement of and support to any children aged 16 and 17 and vulnerable young adults aged 18 – 21+ years.

4. Development of Standards

The Department has developed regional minimum standards for young adults supported accommodation.

Draft standards were initially developed with the inclusion of a wide range of stakeholders involving accommodation providers, NIHE / Supporting People, HSC Trusts, Service Users, Voluntary Sector agencies and Inspectors. In recognising the hybrid nature of the projects and following research on developments in England and Scotland, Action for Children, based on their experience of delivering integrated models of housing support and care to similar groups of young adults in Scotland and implementation of and inspection against the National Care Standards for Housing Support Services and QAF Guidance for Child Care agencies, was commissioned to undertake a review of the initial draft standards and to produce a robust set of standards that would be subject to a formal consultation process commencing in May 2010.

The standard statements and associated criteria have been developed following an examination of current standards from Supporting People Quality Assessment Framework (QAF), Children Homes Draft Standards NI, the Care Homes for Adults National Minimum Standards, Department of Health, England and the National Care Standards, Housing Support Services, Scotland.

The Standards are organised around four **Quality Themes** as follows:

Theme 1: Quality of Care and Support

Theme 2: Quality of the Physical Environment

Theme 3: Quality of Staffing, Management and Leadership

Theme 4: Quality of Quality Assurance and Monitoring

Each theme is underpinned by a number of **Standard Statements**, **Criteria** and guidance on **Potential Sources of Evidence**. The Standard Statement explains the level of performance to be achieved. Each Standard Statement is supported by Criteria which provide further detail on the areas to be considered in the application of the standard to practice, service provision, governance and workforce issues. The section on Potential Sources of Evidence is designed to assist providers to identify evidence to demonstrate how the standard has been met however this list is not intended to be restrictive or exhaustive.

The standards include a self – assessment tool to enable providers to undertake an internal process to assess performance against the standards framework, the results of which can be used to provide evidence of compliance and to plan improvement activities.

The Standards will be measured through self-assessment, monitoring and inspection. The RQIA will evidence that the standards are being met through:

- discussions with the project’s external management, the project manager, staff team and visiting professionals to the project, such as, social workers, personal advisers and referral agencies;
- young people who either live in the project or have recently moved on;
- where appropriate, with the families of the young people residing in the project;
- an examination of records including the young person’s files held within the project;
- an inspection of written policies, procedures and protocols underpinning project operational and service delivery arrangements; and
- discussion and consultation with other stakeholders who commission or contribute to the delivery of the service.

The implementation of the Standards will assist with the planning, delivery, audit, review and inspection of young adults supported accommodation projects and provide a foundation for informing practice and improving services for young people who require this provision.

5. Operational Arrangements

Article 38 of the Health and Personal Social Services (Quality Improvement and Regulation) (Northern Ireland) Order 2003 gives powers to the DHSSPS to publish minimum standards that the RQIA must take into account in the regulation of establishments. Standards serve as a guide to providers of services, service users and the wider public on the quality of services that should be provided and expected. The regulations and minimum standards for Young Adults Supported Accommodation Projects focus on ensuring that young people using the accommodation are safeguarded and that the support and care they receive is quality assured.

Compliance with the regulations is mandatory; non-compliance with some specific regulations is considered an offence. The RQIA must take into account the extent to which the minimum standards have been met in determining whether or not a project maintains its registration or has its registration cancelled, or whether action is required due to any breach of regulations. The minimum standards are the minimum provision below which no provider is expected to operate and are designed to safeguard and promote the health and well being of the young people who reside within them. There is an expectation that service providers will work to provide the optimal standard of accommodation, support and care that will best support young people to make successful transitions into adult life.

6. Values underpinning the Standards

The Standards are based on a set of underpinning values which reflect the recognised rights of children and young people. The United Nations Convention on the Rights of the Child (UNCRC) is an international treaty that grants all children and young people a comprehensive set of human rights. These include the right to grow up in an environment of happiness, love and understanding and the right to develop their personalities, abilities and talents to the fullest potential. The Northern Ireland Government's 10 year strategy for children and young people "Our Children and Young People – Our Pledge" published in 2006 reflects these rights and identifies "living in safety and with stability" as a key outcome to be promoted and achieved for all children and young people in Northern Ireland over the period of the strategy.

The Children (NI) Order 1995 enshrines a number of key principles including the paramountcy of the child and their need to be safe and be protected. Safeguarding Vulnerable Adults: Regional Policy and Procedural Guidance, 2006 is underpinned by a set of principles which reinforce the right of vulnerable adults to protection and to be supported to lead independent lives.

The Standards for Young Adults Supported Accommodation Projects are underpinned by a number of values and principles which further reflect the paramountcy principle of the Children Order, the policy intent of Our Children and Young People – Our Pledge, and the right to protection and safety contained within the Safeguarding Vulnerable Adults policy. The United Nations Convention on the Rights of the Child (UNCRC) ultimately provides the overarching framework for the development of the value statements that underpin the standards. It is therefore essential that a

child's rights perspective is effectively and explicitly embedded into the standards framework and evidenced within the service model and delivery arrangements. Provision and practice should also demonstrate compliance with the provisions of United Nations Convention on the Rights of People with Disabilities (UNCRPD).

Underpinning Values and Principles

Dignity and Respect

The uniqueness and intrinsic value of individuals is acknowledged and each young person is treated with respect.

Independence

Young people have as much control as possible over decisions, which affect their lives whilst being safeguarded against unacceptable risks.

Rights

Young people's rights are safeguarded and actively promoted within the context of the accommodation provided.

Equality and Diversity

All young people are treated equally regardless of their legal status, disability, gender, sexual preference, race, and cultural and religious identity. All services delivered by the provider are within a framework of equal opportunities and anti discriminatory practice.

Choice

Young people are offered the opportunity to select independently from a range of options based on information contained within their support plan, which is clear and accurate.

Fulfilment

Young people are enabled to lead full and purposeful lives in order that their ability and potential can be realised.

Safeguarding

Young people are safeguarded and have stability in all aspects of the services which are being delivered to them and feel free from exploitation, neglect and / or abuse.

Privacy

Young people have the right to privacy and should be free from unnecessary intrusion into their affairs and there is a balance between the considerations of the young person's safety and that of others.

Confidentiality

Young people know that information about them is managed appropriately and will only be disclosed to others when it is in the best interests of the young person's welfare or for the protection of others. Everyone involved in the delivery of the service respects confidential matters.

Partnership

Young people are central to informing and shaping the services that are available to them and are fully engaged in decision making processes about their care, accommodation and housing support arrangements.

These documents are available in a variety of formats. Please contact us with your requirements.

THEME 1

QUALITY OF CARE and SUPPORT

THEME 1 - STANDARD 1 : *Provision of Information*

The project has an up to date statement of purpose and function and young people and referring agencies have all the information they need, available in an appropriate format, to help them make decisions about using the service.

	CRITERIA	POTENTIAL SOURCES OF EVIDENCE
1.1:1	The registered provider ensures that a clear statement of the core aims, purpose and function of the service is produced, updated regularly and reviewed annually. An updated copy of the document should be sent to RQIA.	Statement of Purpose and Function available and sent to RQIA annually or on request. Evidence of review of Statement of Purpose and Function. (Contents detailed at Appendix 1).
1.1:2	The registered provider ensures that an information/introductory pack containing relevant information about the service is available for young people and referrers who are considering using the project.	Up to date Information and/or Introductory Pack available and to include statements about the project as detailed in Appendix 2 . Up to date Young People's Guide available in accessible, understandable and user friendly formats e.g. available through website.

		Feedback from young people and referring agencies.
1.1:3	The registered provider ensures that introductory information is user friendly and is shared sensitively and appropriately with young people in a way that meets their needs and avoids information overload.	As per 1.1:2 Referral procedure.

THEME 1 - STANDARD 2 : *Service Referral and Assessment*

The initial referral and assessment process (which include safeguarding risk assessment) will be undertaken in an open and inclusive way with young people, referrers and other relevant agencies to ensure a robust analysis of the accommodation and support needs of the service user and to ensure that access to the service is based on choice and self determination.

	CRITERIA	POTENTIAL SOURCES OF EVIDENCE
1.2:1	The registered provider ensures that there are appropriate arrangements in place for the referral of a young person to the project.	<p>Copy of the written procedure/referral flowchart in the Induction File/Operational Manual.</p> <p>Copy of information contained in Young People’s Guide.</p> <p>Project Referral Form which incorporates key information outlined in Appendix 3.</p> <p>Register of pre placement visits to the project by the young person and record of agreed next steps.</p> <p>Record of written referrals to the project.</p> <p>Record of discussions and outcomes of referral meetings.</p>
1.2:2	The registered provider ensures that young people are fully involved in the referral	Referral procedure includes process for involving young people. Young adults have access to appropriate

	process and fully informed of project expectations and house rules.	<p>advocacy services/support.</p> <p>Availability of records of discussions/information sharing and outcomes of referral meetings.</p> <p>Copy of general house rules available in Young People's Guide and Operational Manual.</p>
1.2:3	The registered provider ensures that each young person has a designated Support worker prior to project move.	<p>Named Support Worker identified and recorded on file.</p> <p>Evidence of support work sessions.</p>
1.2:4	The registered provider ensures that young people sign a consent form to enable appropriate information sharing between agencies which support assessment, safe planning and ongoing care geared towards meeting their health and well being needs.	Signed Consent Form available on file with a review process in place.

1.2:5	<p>The registered provider ensures a protocol exists between the referrer and the accommodation service which supports the forthright sharing of clear and relevant information for risk and needs assessment purposes.</p> <p><i>(See Agreed Standards and Criteria for Information Sharing for Agencies Working with Families and Children in Northern Ireland – DHSSPS – September 2009).</i></p>	<p>Information Sharing protocol in place based on Regional Information Sharing Guidance.</p> <p>Needs and Risk Assessments on file which incorporate and reflect the views of other services / agencies as appropriate.</p> <p>Relevant assessment documents from other agencies are available to the project to inform needs and risk management assessments and planning.</p>
1.2:6	<p>The registered provider ensures that a risk and needs assessment tool/framework appropriate to the needs of service users is used in the project.</p>	<p>Practice Toolkit is available at the project.</p> <p>Records available of staff trained in the use of UNOCINI and other project specific needs / risk assessment frameworks.</p> <p>Updated assessments are available on individual files.</p>

THEME 1 - STANDARD 3: Support Planning

All young people have individual outcomes focussed support and risk management plans which are appropriate to their needs, promote their independence and clearly identify the service contribution to meeting those needs.

	CRITERIA	POTENTIAL SOURCES OF EVIDENCE
1.3:1	The registered provider ensures young people are encouraged and enabled to take a lead role in the formulation and development of their Placement Agreement and Support plans before the placement starts (for planned admissions). For emergency admissions this should take place within 48hrs.	<p>Copy of Project / Young Person's Placement Agreement available in young person's file.</p> <p>Copy of young person's Support Plan available in young person's file.</p> <p>Records and signed copies of discussions with young people about their Placement Agreement and Support Plan on file.</p> <p>Young person's Contract and Support plan signed by young person, named support worker or project manager and young person's social worker, if necessary.</p> <p>Young person has a copy of Placement Agreement and Support Plan.</p> <p>Evidence of a full plan being put in place following 10 day assessment.</p>

1.3:2	The registered provider ensures support and risk management plans are created from the initial referral information, needs assessment and analysis, and take account of other existing plans for the young person e.g. Pathway Plans/Case Plans.	<p>Signed and dated copy of young person's Support Plan on file.</p> <p>Copies of other relevant support plans in young person's file e.g. Pathway Plans /Case Plans/ Housing Support Plans.</p> <p>The young adults support plan demonstrates effective partnership working.</p> <p>Plans make explicit the respective roles and responsibilities of those contributing to the plan.</p>
1.3:3	The registered provider ensures the support and risk management plans specify how assessed needs can be met and risks managed by the project.	<p>Support Plans clearly specify how assessed needs and risks will be met by the Project in line with the Project's statement of purpose and function and agreed interventions and activities with reference to Appendix 5.</p> <p>Support and risk management plans reflect sensible and appropriate boundary setting for young people commensurate with their needs and abilities.</p> <p>Risk management plans are agreed in consultation with the young person and signed by all parties involved.</p>
1.3:4	The registered provider ensures that there are agreed communication arrangements in place with the referrer for regular update on progress and to address any concerns regarding the young person or the living	<p>Support plans incorporate communication and contact arrangements between the provider/named worker and referrer/case co-ordinator.</p> <p>Correspondence on files evidence appropriate challenge of and</p>

	arrangement.	recourse to referring agencies to ensure the upkeep of verbal and written communication and contact arrangements.
1.3:5	The registered provider ensures support plans clearly state the intended outcomes for young people as a result of placement in the project and describe how these are to be achieved.	Support Plans on file are written in an outcomes focussed way and reflect the project's contribution to meeting those outcomes. Support Plans evidence the use of the NI high level outcomes framework.
1.3:6	The registered provider ensures the safekeeping and maintenance of appropriate and up to date records on file to assist with continuity of care and support and which fulfil legal and regulatory requirements.	Clearly structured files in place. (Sample : Appendix 4) Policies on data protection, confidentiality and safe storage of information are available. Procedure on arrangements for access to records by relevant staff and young people are available. Secure Storage arrangements are in place for young people's files. Evidence of records being regularly signed off by the manager as part of Staff Supervision arrangements. Evidence of ongoing communication with Trusts/Referring Agents.

THEME 1 - STANDARD 4 : *Reviewing the Support Plan*

The review function is understood by the provider to be an essential part of the placement experience for the young person.

	CRITERIA	POTENTIAL SOURCES OF EVIDENCE
1.4:1	<p>The registered provider ensures that needs/risk assessments and Support/Risk Management Plans are reviewed at regular intervals or more frequently as a result of an incident/change of circumstances or at the young person's request.</p> <p>Ideally this should take account of any statutory or other review mechanisms in place.</p>	<p>Copies of review meetings and updated signed copies of Assessment, Support and Risk Management Plans in file.</p> <p>Support and Risk Management Plans record next scheduled review dates.</p> <p>Availability of Project's Policy on Assessment/Support Planning and Review arrangements.</p>
1.4:2	<p>The registered provider ensures that all relevant parties are invited to reviews and that young people are fully involved in the process.</p>	<p>Review reports and minutes are available in young person's file.</p> <p>Records of invitations issued to other agencies/parties available in file.</p> <p>Evidence of young person's written review submission on file as appropriate / applicable.</p>

		<p>Evidence of young people's views being recorded, represented and acted upon where possible. Where this is not possible evidence of explanations being clearly communicated to the young adult is available.</p> <p>Evidence on file of support being provided to young people by advocates/significant adults, where appropriate.</p>
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THEME 1 - STANDARD 5 : *Ending or Leaving the Service*

The service user is assisted to leave the service safely and with appropriate move on plans in place.

	CRITERIA	POTENTIAL SOURCES OF EVIDENCE
1.5:1	The registered provider ensures that proper planning is in place to support young people to move on safely and when ready to do so from the service to more independent living, to return to family or to any other facility or living arrangement.	<p>File records evidence support plans and regular review meetings which identify the exit pathway for the young person.</p> <p>Closure Plans on file clearly identify outcomes achieved, including the views of the young adult about their readiness to move on and make recommendations for further support.</p> <p>A written policy on the project's procedure for the management of planned and emergency departures from the project is in place.</p> <p>Transparency of decision making and robust contingency planning and support are evidenced in all incidents where the young person's move is contrary to their expressed wishes and feelings.</p> <p>Evidence of housing rights advocacy support being provided to the young adult.</p>
1.5:2	The registered provider ensures that, where appropriate, based on an individual's	Support Plan details any agreed post placement support and associated time scales.

	wishes, needs and circumstances, an adequate level of post placement support is available to the young person to assist with the next stage of transition.	
1.5:3	The registered provider ensures exit interviews are offered to service users to ascertain their views.	Exit interview documentation available.

THEME 1 - STANDARD 6 : *Lifestyle/Personal and Health Care Support*

Access to support and a range of services is provided for young people to ensure their health and well being needs are met and they are enabled to make positive choices about lifestyle, personal, social and healthcare issues.

	CRITERIA	POTENTIAL SOURCES OF EVIDENCE
1.6.1	The registered provider ensures that the service is conducted in a way which is compliant with equality legislation, promotes the rights of young people and encourages responsible citizenship.	<p>Equality and Diversity Policy available.</p> <p>Disability Policy available.</p> <p>Record of Staff Training in Equality and Diversity Policy available.</p> <p>Record of Staff Training in Human Rights legislation.</p> <p>Staff Code of Conduct in place.</p> <p>Young people’s support plans and individual sessional records show interventions with young people that support their development and progression towards adulthood (See Appendix 5).</p> <p>Running of the Project evidences that young people are actively encouraged to assume increasing degrees of responsibility, commensurate with their ability, for daily routines, activities, self</p>

		<p>care, independence, money management.</p> <p>Feedback from young people and/or advocates that:</p> <ul style="list-style-type: none"> • Staff treat young people as individuals with unique needs and provide support and services in a sensitive and flexible way. • Staff support young people to participate in religious, cultural and spiritual activities if they wish. • Staff accept the young person's sexuality and view their legitimate sexual needs and preferences as being important to them. • Staff assist the young person to get access to appropriate help, support or guidance where this is required for any aspect of their care. • Staff know and respect the young person's personal lifestyle information and right to privacy.
1.6:2	The registered provider ensures that information relating to the project is produced in user friendly formats and is made available in ways which address cultural and disability needs.	<p>Up to date Young People's Guide is available.</p> <p>Posters/information leaflets highlighting sources of support for specific ethnic groups are visible.</p> <p>Arrangements in place by project for access to translators, sign language communicators or Braille facilities (e.g. List of range and sources are available at the project and agreements are in place for access to services, as required).</p>
1.6:3	The registered provider engages with other agencies to encourage and enable young people to avail of a range of support services which enhance and develop their	<p>Evidence of project's links with other agencies and knowledge of available support services within local communities.</p> <p>Visible evidence of information about other services e.g. directories of local services.</p>

	capacity to reach their full potential.	<p>Evidence of other agencies contributing to information sessions/activities for young people.</p> <p>Support Plans for individual young people evidence project's role in addressing the holistic needs of young people and promoting access to specialist services/supports as required.</p> <p>Support plans evidence provider's role in supporting and encouraging young people's networks and engagement with local leisure, recreational and health facilities, and educational, training and employment opportunities. (See Appendix 5).</p>
1.6:4	The registered provider ensures that the daily routines and rules of the project promote independence and individual choice, subject to restrictions incorporated into the risk management plan and agreed as part of the overall support plan.	<p>Evidence of written Project rules and operational policies and procedures reflect an ethos which promotes an appropriate culture for working with young people. (See Appendix 6)</p> <p>Individual Support Plans.</p>
1.6:5	The registered provider ensures that efforts are made to enable the young person to maintain appropriate and safe relationships with family members and friends subject to any restrictions agreed within the Support Plan and Placement Agreement.	<p>Support Plans specify support and contact arrangements with family and friends.</p> <p>Visitors' Policy.</p> <p>Risk Management Plans are on file and clearly articulate any specific restrictions for individual young people.</p>

1.6:6	Facilities are made available for young people to meet their visitors in private	Feedback from young people. Visitors Policy.
1.6:7	The registered provider ensures that young people are provided with the information and guidance they need regarding safe and appropriate relationships.	<p>Records contain sufficient information to show that staff support or ensure access to support for young people requiring guidance about safe and appropriate relationships.</p> <p>Records show that young people are clear about the project's capacity to support overnight stays or accommodation requests for friends or partners and in particular situations where parenting of a young child needs to be considered.</p> <p>Project staff are aware of DHSSPS Guidance on Delegation of Decisions on "Overnight Stays" for Looked After children.</p> <p>Individual Support Plans and Risk Management Plans make explicit the arrangements in place for overnight stays away from the Project for all young people.</p> <p>Records show that the support of other agencies is evident where decisions are made that a young person's living arrangements at the project are considered risky for the young person or there are concerning relationship issues, such as violence or exploitation.</p>

THEME 1 - STANDARD 7 : *Safeguarding (Including Child Protection/Risk Management) and Protection from Abuse*

The service is provided with a commitment to safeguarding the welfare of children, young people or adults using or visiting the service and to working in partnership to protect vulnerable groups from any form of abuse and exploitation.

Services are provided to vulnerable young people in the context of their transition to more independent living arrangements and as such the likelihood of risk taking behaviours by this age group is acknowledged.

	CRITERIA	POTENTIAL SOURCES OF EVIDENCE
1.7:1	The registered provider ensures that the service has an up to date and robust safeguarding policy and set of procedures that is consistent with the requirements of current legislation, policy and procedures in respect of Children and Vulnerable Adults.	RCPC Child Protection Policy and Procedures available at the project. (SBNI) Project Safeguarding Policy and Procedure in place. A Safeguarding Statement tailored to meet the needs of the individual service is visible at the project, in the Project Information booklet and the Young People's Guide.
1.7:2	The registered provider ensures staff are aware of the Safeguarding Policy and Procedure and how to implement it.	Safeguarding Policy and procedure is available in Staff Induction/Training Manual.

		<p>Safeguarding issues are addressed and recorded as a core aspect of regular staff supervision. Record of staff attendance at mandatory Safeguarding Training.</p> <p>Project staff can demonstrate knowledge of protection from abuse, indicators of abuse, responding to suspected, alleged or actual abuse and reporting suspected, alleged or actual abuse.</p> <p>Designated Safeguarding Officer in place.</p>
1.7:3	<p>The registered provider ensures all allegations and incidents of abuse or concerning behaviour are taken seriously and acted upon and appropriately recorded.</p>	<p>Written records are available of suspected, alleged or actual incidents of abuse and include details of any investigation, the outcome and action taken by the Project.</p> <p>Evidence of additional safeguards being put in place where shortcomings in the Project arrangements are highlighted as a result of an investigation.</p> <p>Records maintained on individual files where appropriate.</p> <p>A register of all untoward incidents and associated action plans is maintained at the project.</p> <p>Records show that all documentation regarding incidents or allegations is circulated to agreed stakeholders as appropriate in line with Project policy and the requirements stipulated within the Service Level Agreement.</p> <p>Policy in place for reporting and management of Serious Adverse</p>

		<p>Incidents which takes account of DHSSPS Policy Circular on Advice to HSC organisations on arrangements for reporting of adverse incidents.</p> <p>Records evidence the effective management and reporting of any serious adverse incidents in line with agreed policy.</p>
1.7:4	The registered provider ensures that staff, volunteers and others working at the service are subject to appropriate recruitment checks including the Access NI enhanced disclosure checks/Vetting and Barring.	Records of checks are processed and maintained through HR Departments.
1.7:5	The registered provider ensures that staff who are found to be unsuitable to work with young people are referred in line with Access NI /Vetting and Barring Requirements	<p>Safeguarding Policy.</p> <p>Code of Conduct.</p> <p>Professional bodies, for example, NISCC.</p>
1.7:6	Individual risk assessments and associated risk management plans are in place for all service users.	<p>Records of Risk Management Plans on file.</p> <p>(These consider and seek to manage or minimise the risk associated with the potential for abuse from others, self harming behaviour (where this is identified as potential risk), potential risk to others from an individual living at the project.)</p>

THEME 1 - STANDARD 8 : *Service User Involvement and Participation*

A culture of service user involvement is embedded in practice and young people’s needs and views are at the centre of all project planning and activity.

	CRITERIA	POTENTIALSOURCES OF EVIDENCE
1.8:1	The registered provider ensures young people participate in and influence how the service works through a variety of means which contribute to improved outcomes.	<p>Participation Strategy in place.</p> <p>Evidence of an active Service User Forum or other method which demonstrates meaningful consultation with young people about the service.</p> <p>Minutes of Meetings / records reflect how service users contribute to discussions about day to day matters as well as overall project and service design.</p> <p>Clear identification in individual service plans or project planning of ways in which aspects of service have changed as a result of service user input.</p> <p>Evidence of project addressing potential for young people to be involved in aspects of recruitment and selection process – e.g. discussions/plans for development.</p> <p>Feedback from young people reflects that they are enabled and</p>

		<p>supported to assume responsibilities for day to day living, for example, cooking, shopping, self care etc.</p> <p>Feedback from young people reflects that they are given choices to contribute to organising and participating in group living activities, where appropriate, e.g. social events, community activities etc.</p> <p>There is evidence of young people sharing responsibility in so far as possible for the maintenance of both private and communal spaces ensuring that these are kept clean, hygienic and free from offensive odours.</p> <p>Suggestion Boxes/Comments Books.</p> <p>Minimum of annual feedback questionnaires to service users living in or who have left the service in the preceding 12 months.</p>
1.8:2	The registered provider ensures young people are given an opportunity to challenge any decision made about them.	<p>Records on file.</p> <p>Discussions with and feedback from young people.</p>

THEME 2

QUALITY OF THE PHYSICAL ENVIRONMENT

THEME 2 - STANDARD 1 : *Quality of Accommodation*

The accommodation provided is suitable for its stated purpose, is accessible, safe and secure, well maintained and provides for the young people's individual and collective needs in a comfortable and homely manner while respecting each individual's privacy.

	CRITERIA	POTENTIAL SOURCES OF EVIDENCE
2.1:1	The registered provider ensures that accommodation is located in an area which is accessible to services.	Feedback from service users reports that the accommodation is reasonable in terms of accessibility to transport, education, training and employment, proximity to friends, families and amenities. Exit Interviews.
2.1:2	The registered provider ensures that appropriate security checks and measures are in place to maintain a safe service for young people.	CCTV Policy is in place and equipment is in place where appropriate. Project holds and maintains a record of visitors. Door entry system/access arrangements are in place where appropriate.

		<p>(Note – Where these arrangements are deemed not necessary or possible a clear rationale for this is available). Each young person confirms that he/she has key access to own bedroom.</p> <p>Signed and dated record of most recent Access NI/Vetting and Barring checks on landlords.</p> <p>Signed and dated record of keys returned by previous residents.</p>
2.1:3	The registered provider ensures that there are appropriate arrangements in place for young people to access help in a crisis or emergency.	<p>Procedures on crisis management/out of hours arrangements are contained in operational manual for the project and included in information for young people.</p> <p>Appropriate staff cover reflected and evidenced in Staff Rota.</p> <p>Back up on call service operational within project.</p> <p>Posters within project displaying information, contact numbers, signposting services.</p>
2.1:4	The registered provider ensures that each young person is provided with a bedroom or self contained flat which is adequately furnished and equipped to meet the individual's needs and lifestyle.	<p>Young Person's Information Guide.</p> <p>Accommodation provided by the service visibly meets the criteria.</p>
2.1:5	The registered provider ensures that accommodation provided for young people meets the minimum standard required for	Accommodation provided by the service visibly meets the criteria.

	adequate floor space.	
2.1:6	The registered provider ensures there is space within each bedroom or self contained flat for each young person to house a reasonable amount of their personal possessions.	Accommodation provided. Feedback from young people using the service. Young people's possessions appropriately accommodated in their own space.
2.1:7	The registered provider ensures a range of comfortable and shared space is provided, both for shared activities and private use.	Visible evidence of accommodation and rooms available reflecting arrangements for access to a range of shared spaces and facilities in line with the project's statement of purpose and function which may include access to shared living space/utilities/food preparation and storage/kitchen facilities/water/hot water/electricity/telephone/television etc. Lockable spaces available to young people for food storage. Physical standards comply with DSD standards governing allocation of space.
2.1:8	The registered provider ensures a good standard of décor and furnishings are maintained throughout the project and within individual and group living spaces.	Visible. Feedback from young people Evidence that furnishings and equipment meet fire regulations and Health and Safety standards.

THEME 2 -STANDARD 2 : *Health & Safety*

The provider ensures that the project complies with all relevant aspects of NI Health and Safety legislation and Fire Regulations and is adequately insured.

	CRITERIA	POTENTIALSOURCES OF EVIDENCE
2.2:1	<p>The registered provider ensures that where applicable the service meets the HMO Standards published by the NIHE.</p> <p>For buildings/services not required to meet the HMO standards the provider ensures that risk assessments/management plans are in place to address specific issues regarding property matters.</p>	<p>An up to date certificate verifying the project's compliance with these standards is available and on display at the project.</p> <p>Updated property Risk Assessment/Management Plans in place which reflect safe access and egress for all persons.</p>
2.2:2	<p>The registered provider ensures that an adequate level of insurance is provided for the overall project, its staff and service users.</p>	<p>Insurance/Public Liability statement available and on display at the project.</p>
2.2:3	<p>The registered provider ensures that all aspects of the project comply with general NI Health and Safety and Fire requirements and are compliant with legislation.</p>	<p>A Property File is maintained at the project containing records of all matters relating to Health and Safety and Property Management.</p> <p>Staff training record reflects evidence of annual mandatory Health and Safety and Fire Training for staff and service users.</p>

		<p>Named Responsible Officer clearly identified at the project.</p> <p>Fire Risk Assessments are regularly reviewed and on file.</p> <p>Evidence of weekly checking system in place.</p> <p>Register of incidents/accidents is maintained and, where appropriate, information shared with relevant governing bodies, e.g. HSE.</p> <p>Evidence of up to date risk assessments and accompanying action plans.</p>
2.2:4	<p>The registered provider ensures that there is an agreed protocol for involvement of and response from PSNI with regard to any incidents of criminal or violent behaviour at the project.</p>	<p>Evidence of agreed regional protocol on Police Involvement in Young Adults Supported Accommodation Projects with reference to Regional Guidance on Police Involvement in Residential Units.</p> <p>Evidence of interim local arrangements between project and PSNI pending development / availability of Regional Guidance.</p> <p>Register of incidents maintained / Minutes of inter-agency meetings and/or meeting with young people.</p> <p>Evidence of untoward incident reports forwarded to relevant agencies e.g. Trusts, referring agency.</p> <p>Evidence of PSNI involvement in incidents is a proportionate and appropriate response.</p>

THEME 3

QUALITY OF STAFFING, MANAGEMENT AND LEADERSHIP

THEME 3 – STANDARD 1: *Staffing Arrangements*

A competent workforce is in place within the project to meet the assessed needs of the young people in line with the project’s statement of purpose and function.

	CRITERIA	POTENTIAL SOURCES OF EVIDENCE
3.1:1	The registered manager ensures that staff are recruited and inducted to the project in a safe and robust manner to protect service users and staff.	<p>Evidence of Recruitment, Appointment and Retention Policies.</p> <p>Job Descriptions and Personnel Specifications / Minimum level entry requirement identified (e.g. NVQ 2 or equivalent experience with expectation to progression to NVQ Level 3 through learning and development plan.).</p> <p>Induction Manual/ Evidence of completed induction in staff training record.</p> <p>Evidence of dates of completed access NI Checks/Vetting and Barring, NISCC Registration/Foundation Standards.</p>
3.1:2	The registered provider ensures that staff have the competences, skills and qualities required to work safely, meet the young	<p>Learning and Development Strategy in place.</p> <p>Learning Needs Analysis in place for each staff member.</p>

	<p>person's needs and achieve any additional workplace training requirements.</p>	<p>Training Plans and Records of Training attended reflect that staff have access to continuous development opportunities commensurate with their level of knowledge, skills and experience.</p> <p>Staff Supervision Records.</p> <p>Annual Appraisals.</p>
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THEME 3 – Standard 2 : *Management Arrangements and Requirements*

Projects are managed and well led by suitably qualified, competent and experienced personnel to ensure the service is delivered to a high standard in keeping with the project’s statement of purpose and function.

3.2:1	The registered provider ensures that the project manager is suitably qualified and experienced and possesses the level of competence and skill required to carry out the job.	Evidence of Recruitment, Appointment and Retention Policies. Project specific Job Descriptions and Personnel Specifications in place. Minimum level entry requirement identified e.g. Professional qualification in Social Work, Social Care, Youth and Community Work or other relevant qualification and range of relevant experience. Induction Manual/ Evidence of completed induction in staff training record. Evidence of dates of completed Access NI Checks/Vetting and Barring. NISCC Registration/ Standards. Agreed level of mandatory training required for all staff to include safeguarding, child protection, health and safety, disability etc
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3.2:2	The registered provider ensures that the project operates within the relevant legal frameworks and that an appropriate range of operational and employment policies and procedures for the service is in place and implemented.	<p>Statement of Purpose and Function.</p> <p>Policies and Procedures as identified in Appendix 6 are in place, dated and in accordance with statutory requirements.</p> <p>Evidence of regular review and revision and date of sign off (minimum annually or in line with changing legislation).</p> <p>Evidence of staff training in policies and procedures.</p> <p>Evidence of staff and young people’s involvement in the review and revision of Project’s policies, procedures and practices.</p>
3.2:3	The registered provider ensures that staff are properly managed and supported in their role and that appropriate guidance and direction is provided to support the delivery of a high quality service for young people.	<p>Code of Conduct.</p> <p>Evidence of adherence to Supervision Policy.</p> <p>Evidence that supervision takes place in line with project’s policy on supervision.</p> <p>Evidence of individual and group supervision in staff records.</p> <p>Evidence that issues of poor performance are appropriately addressed.</p> <p>Evidence that young people’s individual Support Plans are in place, regularly reviewed and updated.</p> <p>Clear management structure that identifies lines of accountability,</p>

		roles and details responsibilities.
3.2:4	The registered provider ensures the provision of quality care and support through the promotion of best practice and continuous improvement.	<p>Evidence of regular Team Meetings /Minutes of Meetings.</p> <p>Written Team Development Plan available.</p> <p>Staff report involvement in Business Planning Processes and reviews of project Statement of Purpose and Function.</p> <p>Evidence of Communication Strategy/ process for dissemination of information regarding legislation, policies, procedures, innovative practice and other relevant materials.</p>
3.2:5	The overall management of the provider organisation ensures the effectiveness, financial viability and accountability of the project.	<p>There is an Annual Project Review and Business Plan.</p> <p>Evidence of Project Health Checks and Self Assessment.</p> <p>Financial Management Systems in place to ensure effective budget setting/planning/monitoring and financial controls/audited accounts.</p> <p>Regular monitoring reports/returns to commissioners are on file.</p> <p>Accreditation with Supporting People in place.</p> <p>Record of Contract Monitoring meetings / Validation Visits by Supporting People.</p>
3.2:6	The registered provider ensures that an appropriate level of accountability is delivered through appropriate reporting to, chairing of or participation in project	<p>Record of membership of management group / steering group for the Project.</p> <p>Record of regular reporting.</p>

	steering groups or management committees/boards depending on the requirement.	Minutes of Meetings.
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THEME 4 - QUALITY OF QUALITY ASSURANCE AND MONITORING

THEME 4 STANDARD 1 : *Quality Assurance and Monitoring*

Effective, inclusive quality assurance and monitoring systems are in place involving service users, staff and other stakeholders.

	CRITERIA	POTENTIALSOURCES OF EVIDENCE
4.1:1	The registered provider ensures that as part of Quality Assurance a self assessment / evaluation tool is deployed at the project to monitor performance on a quarterly and annual basis against Business Plan Objectives and Standards.	Evidence of ongoing Project Health Checks using the Self Assessment Tool. Business Plan Reviews. Completion of Supporting People QAF.
4.1:2	The registered provider ensures that there is a range of tools in place to assist in the assessment and monitoring of the service.	Quality Assessment/Assurance Model in place. Evidence of staff trained in using the QA model. Record of Team Development Reviews. Records of Consultation with Stakeholders including service users. A mechanism is in place to engage service users in monitoring and service evaluation. Evidence of how the voice of users contributes to service

		<p>improvement.</p> <p>Completed Questionnaires.</p> <p>Completed Monitoring reports as required by the funders of the service and/or statutory bodies accessing placements.</p> <p>External Evaluation or Research Reports.</p> <p>Record of Service Level Agreement between funder/s and Project and record of meetings to monitor and review Service Level Agreement on an annual basis.</p> <p>Review arrangements in place in relation to young people's Support Plans which involve referrer / case manager.</p>
4.1:3	The registered provider ensures that there is a system in place for making complaints and representation.	<p>A Complaints and Representation Policy and Procedure are in place and there is a Young Person's Information Guide to the procedures including details about how to access an advocate if required.</p> <p>Service users and Stakeholders report understanding and knowledge of the Complaints and Representation Policy and Procedure and how to use it. This is strengthened through appropriate training for staff and young adults.</p> <p>Feedback from young people indicates that they are encouraged to make complaints in a way which is most helpful to them using internal or external supports.</p>

		<p>A register of all complaints is available within the project detailing actions taken to resolve the issues.</p> <p>Evidence that learning from complaints is used to inform practice and service improvement where appropriate.</p>
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Appendix 1

Content of Statement of Purpose and Function

The written statement of purpose includes the following information:

1. A Statement of the overall aims of the accommodation project and the objectives/outcomes to be attained with regard to young people being accommodated there
2. A statement of the facilities and services to be provided for the young people accommodated at the project
3. The name and address of the registered person
4. The name of the registered manager and their relevant qualifications and experience
5. The number, relevant qualifications and experience of staff working at the project and corresponding staffing arrangements in place within the project
6. The arrangements for the supervision, training and development of staff
7. The organisational structure of the project
8. The following particulars: -
 - The age, range, gender and numbers of young people for whom the accommodation is to be provided for
 - Whether the project is to provide any specialist accommodation
 - The range of needs which the project intends to meet
9. The arrangements in place for the management of referral and admission to the project including if necessary the policies and procedures for emergency admissions
10. A description of the project's underlying ethos and philosophy and a description of the theoretical/housing support/care model from which it operates
11. The arrangements in place to protect and promote the health needs of young people accommodated at the project
12. The arrangements in place to support the development of life and social skills which will enable young people's transition towards adulthood and independent living
13. The arrangements in place to promote the young people's involvement in education, training and employment
14. The arrangements in place to promote the young people's involvement in social, recreational, sporting, cultural and community activities
15. The arrangements in place to ensure that young people receive the financial support to which they are entitled and are assisted to manage their income and budget appropriately

16. The arrangements in place to ensure young people are consulted about their future care and about the operation of the home
17. The arrangements in place to promote positive behaviour and behaviour management techniques for crisis intervention
18. The arrangements in place to safeguard young people and to counter bullying in the project
19. The procedure in place for the handling of any unauthorised absence of a young person from the project
20. A description of any electronic or mechanical means of surveillance in the project and how it may be used
21. The fire precautions and associated emergency procedures in the project
22. The arrangements for the young people's spiritual well being
23. The arrangements for visits to the project including professional visits and those from family and friends/partners

The Fitness of the Registered Person

To determine the fitness of the registered person applying for registration the following are required: -

- Confirmation of the person's identity
- Two satisfactory references
- Satisfactory ACCESS NI checks
- Evidence of qualifications and registration with any professional regulatory body
- Pre employment health assessment
- Financial/Business Plan
- Adequate Insurance arrangements

In addition the RQIA through interview is assured that the person:

- Has knowledge and understanding of his or her legal responsibilities
- Intends to carry on the project in accordance with the legal requirements, DHSSPS Minimum standards and other standards set out by professional bodies and standard setting organisations
- Intends to undertake training to ensure that he or she has the necessary up to date knowledge and skills

The Fitness of the Manager

To determine the fitness of the person applying for registration as the manager the following are required:

- Confirmation of the applicant's identity including a recent photograph
- Two written references, linked to the requirements of the job, one of which must be the applicant's current or most recent employer
- A full employment history, including why each employment ended and an explanation of any gaps in employment
- Satisfactory Access NI checks
- Documentary evidence of any professional qualifications and accredited training
- NISCC registration
- A pre employment health assessment

In addition RQIA is assured through interview and the registration process that the person:

- Has the knowledge and understanding of his or her legal responsibilities
- Has the knowledge of current leaving and aftercare service provision, looked after children and vulnerable adults, housing legislation, policy and support, Supporting People policy and arrangements
- Has received training and has the knowledge of interagency joint protocol arrangements regarding the assessment, placement and management of 16+ year olds in supported accommodation

Appendix 2

Young Person's Guide/Introductory/Information Pack (Suggested Contents)

- (i) Aims/Purpose and Function
- (ii) Who the service is suitable for
- (iii) How to access the service/ Referral Pathways/ Referral Form/Arrangements for visits to the project pre referral or pre placement
- (iv) Safeguarding Ethos and Policy including basic rules for protection of children and vulnerable adults
- (v) Information Sharing requirements – when, by who and for what purpose
- (vi) How needs and risks are assessed and how support plans are created
- (vii) Description of the accommodation and facilities available
- (viii) Range of services/support available within the project
- (ix) How the service is staffed
- (x) Expectations, rules and responsibilities
- (xi) A copy of the Placement Agreement
- (xii) Information about costs and charges to be contributed by young person
- (xiii) Reports/Reviews/Access to Information and Records including arrangements for seeking consent and regular review of consent
- (xiv) Copy of the most recent RQIA inspection report on file
- (xv) How to Complain
- (xvi) Your rights and access to advocacy services
- (xvii) Working with the referring agencies
- (xviii) Confidentiality and Privacy Statement
- (xix) Equality, Diversity and Inclusion Statement

- (xx) Copy of policy statement on service user involvement in service assessment, planning and improvement
- (xxi) Information about local arrangements for translation of information or providing information in alternative formats

Appendix 3

Proposed File Structure

- Section A: Referral Information and Personal Details
- Section B: Needs Assessments (Project assessments and UNOCINI or other relevant Assessments)
 - Risk Assessment
 - Other LAC information
- Section C: Young People's Support Plans/Reviews
 - Risk Management Plans
 - Pathway Plans
 - Closure/Move on Plans
- Section D: Chronology / Running Record
- Section E: Information regarding Health/Medication
- Section F: Education, Training, Employment
- Section G: Safeguarding/Child Protection/Vulnerable Adult Reports and Incidents including Untoward Incident reports
- Section H: Occupancy Agreement/Contract/Costs/Finance
- Section I: Correspondence
- Section J: Confidential or Third Party Information
- Section K: Complaints
- Section L: Specific Issues – e.g. Young person's participation/feedback

Appendix 4

Information to be considered for inclusion on Referral Form (Sample)

Name of Young Person

Current Address and Telephone Number of Young Person

Date of Birth

Gender

Ethnicity

Reason for Referral/Intended Outcomes

Name and Contact Details of the Referrer

Has the referral been discussed with the young person/is he or she in agreement with the referral/young person's views

Names and Contact details of next of kin/significant friends, family members or carers

Is the young person subject of any particular statutory assessment or planning processes – e.g. LAC/Leaving and After Care/Child Protection/Family Support case planning?

Can the referrer provide copies of relevant reports if necessary/Does the Young Person Agree?

Names and Contact details of other professionals or agencies involved with the young person

Identification of particular needs or risks which may need to be considered more fully in the Project's needs and risk assessment and support planning arrangements e.g.

- Health and Development Needs
- Family/Personal/Social Relationships
- Behavioural Issues
- Mental Health/Emotional Well Being
- Disability including Learning Disability

- Education and Learning
- Identity, Self Esteem and Self Care
- Housing Support

Referral information should also include identified risks to self, others and to the community

Appendix 5

Examples of a Range of Services and Supports which the project may offer directly to young people or support and encourage them to access through other agencies.

Access to specialist/therapeutic support services

Access to support services for young parents, where appropriate

Accessing other agencies and communities

Attendance to Health Care Needs including Sexual Health needs /
Registration with GP / Dentist / Optician and attendance at appointments

Budgeting, Managing Finance, accessing entitlements and funding

Building Resilience/Self Esteem and Confidence

Citizenship/Living in the Community and being a Good Neighbour

General Counselling and Emotional Support

Home and Tenancy Management

Home Safety

Independent Living Skills / Preparation for Life Programmes

Keeping Safe

Managing Relationships

Personal and Home Care Skills

Planning for the Future

Promoting Health Lifestyle Choices

Pursual of Education, Training and Employment Opportunities

Pursuit of Hobbies

Sexuality, sexual development and identity

Shopping and Cooking

Social and Negotiating Skills

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Appendix 6

Examples of Policies and Procedures to be developed by Service providers

Practice

Access to personal files and other records

Access to young people's bedrooms or self contained accommodation by staff or other young people/Searching young people's rooms

Advocacy/Independent Visitors/Access to mentoring services for young people

Alcohol, drugs and substance misuse – management of and access to supports

Anti bullying policy

Arrangements for support through Education, Training, Employment

Arrangements for work on Independent Living Skills/Managing Accommodation

Consequences of Untoward behaviour/Permissible consequences
Administration and Management of Medicines for young people

Contact for young people with Family and Friends at the project

Dealing with absences of young people from the project

Health Care

Home Care Skills

Hygiene/Intimate Care

Information Sharing and Record Keeping

Management of Young People's money and Budgeting

Management of admissions, discharges and placement disruption

Named Worker Arrangements – Roles and Responsibilities

Needs Assessment

Participation and Service User Involvement

Pathway Planning

Positive Behaviour Management

Provision of front door and bedroom keys

Referral and Admission or Placement Procedure for young people

Relationships

Reviews

Risk Assessment

Safeguarding and Protection of Children and Vulnerable Adults in line with regional documents

Sexual Health

Statement of values and ethos of project

Support Planning

Transport

Working with young people's sexuality and personal preferences

Employment and Staff Management

Absence Management

Absence of Manager

Anti – Bullying, anti-racism

Code of Conduct

Complaints
Confidentiality

Disciplinary Procedures

Grievance

Harassment

Lone Working Standards

Recruitment and Retention

Relationships between staff and young people

Staff Care and Welfare at Work

Whistleblowing

Performance Management

Management of Information

Monitoring arrangements

Staff Induction

Staff Meetings

Staff Training

Supervision and Appraisal Policy

Health and Safety

Accidents reporting, recording and notification

Computer Use and Internet Safety

Death and Serious Injury/Notifications

First Aid: Administration by Staff

Fire Safety

Food Hygiene and Safety

Gift Giving and Receiving

Health and Safety Policy

HIV/Aids awareness and management

Repairs and Maintenance

Responding to allegations of abuse

Security

Smoking

Financial Management

Accounting and Financial arrangements

Cash handling

Insurance

Other aspects of Facility Management

Handovers

Inspections

Insurance/Public Liability

Night Supervision or on call arrangements

Notification of Events

Occupational Health

Quality Improvement

Rota Cover

Use of Volunteers

Young People's Meetings

This list is not exhaustive. Providers, in the development of project specific policy and procedures, should take account of existing and regional guidance and documentation that may be applicable, for example,

Regional Guidance: Policy Involvement in Residential Units: Safeguarding of Children Missing from Home and Foster Care

DHSSPS Policy Circular on Arrangements for Adverse Incident Reporting

DHSSPS Circular on Delegation of Decisions on "Overnight Stays" for Looked After Children