



**Admissions Policy**

**November 2024**



## REGULATIONS AND STANDARDS

[The Quality and Purpose of Care Standard](http://qualitystandards.proceduresonline.com/homes/p_quality_standards.html#qual_purpose)
Regulation 6

[The Care Planning Standard](http://qualitystandards.proceduresonline.com/homes/p_quality_standards.html#care_planning)
Regulation 14

This chapter deals the process from enquiries through to admission for each community that is transparent, consistent, known and understood by all.

For the individual children's homes referrals and admissions, see: [Statement of Purpose](https://childhoodfirst.proceduresonline.com/p_sop.html).

### AMENDMENT

This chapter was amended in July 2022 to note the importance of a child's/young person's belonging’s being transferred in appropriate luggage and to add a link to the NYAS ‘My Things Matter’ Report – support and respect care-experienced children and their belongings when they move.

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## 1. Admissions and Reception

All placement admissions to a Childhood First Therapeutic Community home are planned. A placement will only commence after a thorough Referral Assessment Process to check compatibility and our ability to work with the child/young person is ascertained and vice versa. A detailed process for the assessment of each referral must be followed by all Childhood First staff and is available to placing authorities on request. An Impact Assessment is undertaken, completed and shared with the child / young person's local authority prior to any admission as part of our Assessment, Placement, Treatment and Transitions model of assessment (APPT). Childhood First offers placements that are medium to long term, enabling the child/young person the best opportunity to recover from their trauma, develop resilience and achieve academically, socially and clinically in order that they can become effective, contributing and productive members of society and reach their potential.

For each referral enquiry  we require detailed paperwork, together with any professional reports and a social [Chronology](http://trixresources.proceduresonline.com/nat_key/keywords/chronology.html). Once read a professionals meeting will be arranged at the specific community to explore in detail the whether the home can meet the child / young person's needs.

If from this meeting all are agreed that a placement with Childhood First would be appropriate, a senior person will meet the young person in the current placement, and invite the child/young person to visit the community. If possible the child / young person would visit the home to see the placement prior to admission. This may include additional visits and overnight stays at the home.

On Admission the required statutory paperwork must be completed and provided. There is an [Admissions Checklist](https://childhoodfirst.proceduresonline.com/local_resources.html) available for completion by the home and placing authority Social Worker. The child should be encouraged to bring with them favourite and cherished possessions, although expensive items will require careful consideration. Suitable luggage should be used; a child's belongings should never be transported in bin-bags or other inappropriate containers (see [NYAS, My Things Matter Report](https://www.nyas.net/news-and-campaigns/campaigns/current-campaigns/my-things-matter/)).

Each child/young person receives a copy of the Children's guide when visited and has a planned induction process on arrival. This includes assessments of both their emotional functioning and their academic level.

## 2. Client Groups

All children and young people referred to Childhood First are considered on an individual basis.

In our experience there is a distinct difference between how certain presenting problems are able to be worked with during the latency and adolescence stages of child development. Whilst most presenting problems can be considered during the former, the latter demands much more thought and consideration.

For both there is a requirement that young people's cognitive ability allows them to access our treatment methodology.

Each child/young person referred to us is considered with regard to their clinical details together with their current social psychopathology.

This allows us to understand and assess how they will present in a community, what this will evoke from other resident children/young people and how we will manage this and work with them.

However, from our experience there are some children and young people whose presenting difficulties require a different environment than the one we can offer. This is particularly present for the adolescent age range when risk factors are more acute, for example, substance abuse, arson, and prostitution.

## 3. The Service Offered

The service we offer is at four specialist residential homes that operate 52 weeks a year and offer Care, Education and Treatment for children/young people between the ages of 5-19 based on psychodynamic principles (IST).

Integrated Systemic Therapy through group living is based on psychodynamic principles. This is a specialist, bespoke service for social services to cover a small number of children/young people.

Many children/young people will have experienced multiple breakdowns of placements, part of what we offer initially is understanding, knowing and acceptance. The child/young person will know at some level they need what we offer them, this can be achieved across the age range.

The influence/impact of their peers who have engaged in the process is an essential part of enabling a child/young person to recognise the benefit of engaging in the work and, once they do, then being able to engage in education.

All the children/young people placed with Childhood First are [Looked After Children](http://www.proceduresonline.com/resources/keywords_online/nat_key/keywords/looked_after_child.html) therefore we require a [Care Order](http://www.proceduresonline.com/resources/keywords_online/nat_key/keywords/care_order.html) to be in place.

In tandem with our communities we have a Placement and Family Support Service This supports both the work within the home with an individual child/young person and externally with the network around them, including the family.