Broomsdale House

Statement of Purpose

August 2026
23 Broomsdale Road, Batley, WF17 6PF

A 3-Bedded Residential Children's Care Home

Specialising in Emotional & Behavioural Difficulties (EBD) — Medium Priority

Providing Therapeutic Residential Care for up to Three Children Aged 8–17 Years

Registered with Ofsted under the Children's Homes (England) Regulations 2015

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Home Address

Home Name	Broomsdale House
Home Type	3-Bedded Residential Children's Care Home
Specialism	Emotional & Behavioural Difficulties (EBD) — Medium Priority
Address	23 Broomsdale Road, Batley, WF17 6PF
Age Range	8–17 years
Capacity	Up to three (3) children

Registered Manager

Proposed Registered Manager — details to be confirmed upon Ofsted registration.

23 Broomsdale Road, Batley, WF17 6PF

Telephone: [To be confirmed upon registration] | Email: [To be confirmed upon registration]

Responsible Individual

Responsible Individual — to be confirmed upon Ofsted registration.

Telephone: [To be confirmed upon registration] | Email: [To be confirmed upon registration]

Regulatory and Emergency Contact

Ofsted URN: [To be inserted upon Ofsted registration]

Ofsted National Business Unit: Piccadilly Gate, Store Street, Manchester, M1 2WD | Tel: 0300 123 1231

24-hour on-call management line: [To be confirmed upon registration]

2. Introduction

Broomsdale House is situated at 23 Broomsdale Road in Batley, within the Kirklees Metropolitan Borough Council area of West Yorkshire. Batley is a vibrant, close-knit, and culturally diverse market town in the Spen Valley, lying between the cities of Leeds and Huddersfield. The town has a proud and distinctive character — a working community shaped by its industrial heritage, its strong South Asian and diverse minority ethnic communities, and its deeply rooted local identity. Broomsdale Road itself sits within an established residential neighbourhood offering a genuinely community-integrated setting for the home.

Batley is exceptionally well connected within West Yorkshire. Leeds city centre is approximately 8 miles to the north-east, Huddersfield approximately 7 miles to the south-west, and Dewsbury town centre just 3 miles away. The M62 motorway corridor provides direct access across the region, and local bus services connect Batley to all major West Yorkshire destinations. This connectivity is a significant asset for looked-after children placed at Broomsdale House — ensuring seamless access to specialist education, therapeutic services, family contact visits, CAMHS, and the full range of health and community resources available across Kirklees and West Yorkshire.

A comprehensive Location Risk Assessment is maintained in full accordance with Regulation 46 of the Children's Homes (England) Regulations 2015, reviewed annually and whenever the circumstances of the area or the children in placement change materially. The assessment confirms that the Batley location is appropriate, safe, and well-resourced for a residential children's care home.

Broomsdale House is a 3-bedded residential children's care home providing therapeutic care and accommodation for up to three looked-after children between the ages of 8 and 17 years. These children will be placed at the home by local authorities in accordance with the legal framework for children and young people in England. For the purpose of ease and consistency, we refer to the children in our care as 'children' throughout this document.

Broomsdale House specialises in supporting children with emotional and behavioural difficulties (EBD) at a medium priority level. This means the home is specifically designed, staffed, and therapeutically equipped to support children with moderate to significant EBD presentation — children who require a structured, consistent, boundaried, and therapeutically attuned residential environment in order to make meaningful and lasting progress.

The 3-bedded model at this home provides the ideal balance between highly individualised care and the social and developmental benefits of small group living. Three children form a genuine peer community — learning to navigate peer relationships, developing social skills, sharing positive experiences, and supporting one another — while each receiving the consistent, personalised, and intensive therapeutic attention they need from a dedicated and stable staff team.

We are committed to working in genuine partnership with the children in our care, their families, their placing local authorities, and all relevant health, education, and therapeutic professionals — always keeping the child's welfare, safety, and long-term outcomes as the paramount consideration in every decision we make.

Exclusion Criteria

Broomsdale House does not consider placements for children presenting with the following:

- Children who have a significant addiction to drugs or alcohol requiring specialist inpatient substance misuse treatment beyond the home's clinical expertise.
- Children who set fires — current or recent, active fire-setting behaviour.
- Children who require continuous, 24-hour psychiatric supervision or inpatient-level clinical management.
- Children with profound learning disabilities requiring a specialist adapted learning environment.
- Children whose individual risk profile would place other residents at unacceptable or unmanageable risk within the home's staffing model.
- Children whose needs cannot be safely and therapeutically met alongside the current mix of children in the home.

This Statement of Purpose is written and maintained in full accordance with Regulation 16 and Schedule 1 of The Children's Homes (England) Regulations 2015 and the Quality Standards. It is reviewed annually or whenever there are significant changes to the service, the children in placement, or the applicable regulatory framework.

3. Ethos

Our ethos at Broomsdale House is to provide personalised, high-quality therapeutic care within a warm, nurturing, and family-oriented environment. We believe that every child — regardless of their history, their behaviour, or the challenges they face — has the capacity to grow, heal, and flourish. Our commitment to every child in our care is total and unconditional.

The 3-bedded model is not simply a smaller version of a larger children's home — it is a distinctly powerful therapeutic environment in its own right. The intimacy of the setting, the stability and continuity of the staff team, and the careful management of the peer group all contribute to an environment where genuine and deep therapeutic change becomes possible, even for children who have experienced repeated placement breakdowns and multiple forms of adversity.

We believe that every child is a unique individual — with their own strengths, interests, history, cultural identity, and way of experiencing the world. At this home, children are truly known: known by name, known as individuals, known for their potential rather than their history. We celebrate who each child is, and we invest in helping them discover and build on their own strengths.

The views, wishes, and feelings of the children in our care are central to everything we do. We are here to support and promote each child's growth in every area of their life — emotionally, socially, educationally, culturally, and in terms of their physical and mental health and wellbeing. We aim for children to feel genuinely at home — even while away from home.

Our approach is underpinned by the PACE model (Playfulness, Acceptance, Curiosity, and Empathy), developed by Dr Dan Hughes specifically to support children who have experienced early trauma, neglect, and disrupted attachment. PACE is not simply a set of techniques — it is a way of thinking, feeling, communicating, and being with children that helps them to feel genuinely safe, understood, and connected to the adults in their lives.

We believe that challenging behaviour is always a form of communication — a signal of an unmet need, an overwhelming feeling, or the enduring legacy of past harm. Our role is not to suppress or punish behaviour but to understand it — to look beneath the surface with genuine curiosity and compassion — and to respond in ways that help the child feel truly heard, understood, and supported in developing healthier and more effective ways of meeting their needs.

This home is committed to providing a consistent, warm, stable, and genuinely caring team of adults who are present for the children in every meaningful sense — who remember their birthdays, who celebrate their achievements with genuine joy, who notice when they are struggling, and who show up for them reliably and warmly, day after day and week after week.

4. Our Aims, Outcomes & Methods

Our Aims

Here at Broomsdale House, we aim to provide a safe and welcoming environment similar to a family home. The 3-bedded model is specifically suited to achieving this — it is small enough to be genuinely homely, intimate, and family-like, while being large enough to provide children with the peer relationships and shared experiences that are essential to healthy development.

We aim to prepare every child in our care for their future. Every child who lives in this home has the right to a childhood that is as full, joyful, and rich in positive experience as possible — and has the right to leave the home with greater emotional resilience, stronger self-knowledge, better social skills, and a clearer sense of who they are and what they are capable of. Specifically, we aim to prepare children for:

- An eventual return to their family of origin where this is safe, viable, and genuinely in the child's best long-term interests.
- Integration into long-term foster care, with a family who can provide the ongoing consistency and nurture the child deserves.
- Long-term residential care where this best meets the child's individual needs, wishes, feelings, and circumstances.
- Semi-independent or fully independent living, equipped with all the practical, emotional, and social life skills needed for a safe and fulfilling adult life.
- Any other appropriate transition agreed between the child, their placing authority, their family, and all key professionals.

Our Outcomes

- We provide high-quality, individually tailored therapeutic care that supports each child with EBD (medium priority) to make significant and meaningful progress, targeting successful outcomes across all domains of the Ofsted Quality Standards.
- Based on each child's views, wishes, choices, and needs, we develop comprehensive Individualised Care Plans that set meaningful, child-centred goals across all areas of development — positive relationships, enjoyment and achievement, health and wellbeing, and education.
- We maintain robust, evidence-based safeguarding procedures to protect every child from any form of harm. Safeguarding is the non-negotiable foundation of every decision, interaction, and policy at this home.
- We monitor and review the developmental outcomes of each child against their Care Plan objectives, adapting our approach as children grow, develop, and as their needs and circumstances change.
- We establish effective, collaborative working relationships with each child's school, alternative provision, or specialist educational setting — ensuring attendance, support, and every opportunity to reach full educational potential.

- Our home has an absolute and unwavering commitment to equality, diversity, inclusion, and anti-discriminatory practice in every aspect of its work, from staffing and culture to daily care and activities.
- We provide each child with the stability, security, and opportunity to develop practical, social, emotional, and life skills that will build their confidence, independence, and readiness for the future.
- We support every child to develop a positive personal identity — affirming their racial, cultural, religious, gender, and individual identity in every interaction and in the culture of the home.

Our Methods

The staff team at Broomsdale House use therapeutic parenting approaches in every interaction with children throughout every day. All staff are comprehensively trained in PACE (Playfulness, Acceptance, Curiosity, and Empathy) — the trauma-informed model of care developed by Dr Dan Hughes to support children who have experienced early trauma, neglect, and disrupted attachment.

PACE is not simply a training course or a set of strategies — it is a whole-home culture and philosophy that shapes how staff think, feel, communicate, and engage with children in every moment of daily life. Using PACE enables staff to slow down their responses, stay regulated and emotionally available, and tune sensitively into what the child is experiencing in any given moment. It enables children to experience the consistent, attuned, and genuinely empathetic adult presence that is the most powerful therapeutic resource available in residential childcare.

In addition to the PACE model, our methods include: individual Positive Behaviour Support (PBS) plans for every child; personalised de-escalation profiles specific to each child's triggers, warning signs, and effective strategies; life skills development embedded into daily routines and keyworker sessions; trauma-informed attachment-aware practice across the whole staff team; and meaningful multi-agency collaboration with all relevant health, education, and social care professionals.

As a very last resort — where the immediate physical safety of a child or others is at risk and all other approaches have been attempted — staff are trained to use Team Teach physical intervention techniques in full compliance with Regulation 20 of the Children's Homes (England) Regulations 2015. All such interventions are fully recorded, reviewed within 24 hours, debriefed with the child, and reported within required timescales.

Our home adopts a keyworker-led approach to assessment, care planning, and intervention. Keyworker sessions are a central feature of every child's care — providing regular, dedicated, one-to-one time in a safe, trusted, and purposeful relationship. We consistently involve children, their families, and all relevant professionals in implementing, monitoring, and reviewing care plans. Quality assurance mechanisms including monthly Regulation 44 visits and six-monthly Regulation 45 reviews ensure the home continuously improves.

5. Our Home

Broomsdale House is a well-maintained, thoughtfully adapted, and beautifully furnished 3-bedded residential care home situated at 23 Broomsdale Road, Batley, WF17 6PF. The property has been prepared to the highest possible standard to provide a warm, nurturing, and therapeutically designed home for up to three children with emotional and behavioural difficulties. Every room, space, and feature of the home has been considered and designed with the children's needs, comfort, dignity, safety, and individual wellbeing in mind.

Ground Floor

- Lounge: A spacious, comfortable, and welcoming family living room — furnished with quality seating, books, games, art and craft materials, and leisure resources carefully tailored to the individual ages, interests, cultural backgrounds, and preferences of the children in placement. The lounge is the heart of the home: a genuinely relaxing and enjoyable space where children can unwind, socialise, pursue hobbies, create, and simply be themselves.
- Kitchen and Dining Area: A fully equipped and well-maintained kitchen and dedicated family dining space where children share mealtimes in a warm, convivial, and family-style setting. The kitchen is a central and valued space in the life of the home — children are actively involved in meal planning, cooking, and kitchen routines as a valued part of their life skills development. Mealtimes at this home are genuine social occasions, treated with care and warmth.
- Office: A dedicated, private management and administrative space for the Registered Manager and senior staff — ensuring all professional, administrative, and confidential activities are conducted separately from and without intruding into the children's own living environment.
- Toilet: Ground floor toilet facilities for the use of children and staff throughout the day and evening.
- Hallway and Access: A welcoming entrance hallway with appropriate access control, ensuring the safety and security of the children and staff at all times while maintaining the genuine feel of a family home.

First Floor

- Bedroom 1: A generous, private, beautifully furnished, and individually personalised bedroom exclusively for the first child in placement — decorated and styled to reflect that individual child's identity, tastes, interests, and preferences. Every child's bedroom is their own private sanctuary within the home.
- Bedroom 2: A generous, private bedroom exclusively for the second child — equally personalised, high quality, and furnished with the same commitment to individual identity and comfort.

- Bedroom 3: A generous, private bedroom exclusively for the third child in placement — equally beautiful, personalised, and private. Each child's bedroom is theirs, and theirs alone.
- Staff Room: A dedicated first floor sleep-in or waking night staff room for the overnight Residential Care Worker — ensuring their immediate and responsive availability throughout the night while maintaining full, appropriate professional boundaries.
- Bathroom: First floor bathroom facilities with appropriate privacy measures, serving the three children's bedrooms and the staff room.

Each child's bedroom is furnished and fitted to a high standard, and children are warmly and enthusiastically invited and supported to personalise their room upon arrival and throughout their placement — choosing posters, photographs, decorations, bedding, and soft furnishings that reflect who they genuinely are. Upon arrival, every child receives a personalised welcome basket — a warm and tangible first message that they belong here, and that this is their home.

Broomsdale House is fully compliant with all applicable health and safety and fire safety regulations. Safety measures include: window restrictors on all upper floor windows; secure storage of all medications and hazardous materials; a comprehensive interlinked fire detection and alarm system (tested weekly and serviced annually); clearly marked and unobstructed fire escape routes throughout the property; fire extinguishers serviced annually; and Personal Emergency Evacuation Plans (PEEPs) for every child and staff member. The physical environment of the home is reviewed and assessed through monthly internal health and safety inspections and monthly Regulation 44 independent visits.

The outdoor space at Broomsdale House provides a safe, private, well-maintained garden area for recreation, outdoor activities, fresh air, and therapeutic gardening and nature-based activities. The garden is maintained to a consistently high standard and is adapted regularly to reflect the interests, preferences, and therapeutic needs of the children currently in placement.

6. Referrals

Referral Criteria

Broomsdale House operates a rigorous, thorough, and carefully managed referral assessment process. All potential referrals are carefully assessed by the Registered Manager prior to any placement agreement being made. No referral is accepted without a comprehensive assessment confirming that:

- The home can effectively, safely, and therapeutically meet the child's individual needs within its current operational model, staffing structure, and physical environment.
- The proposed placement will not adversely affect the welfare, safety, dignity, or wellbeing of the other children currently placed at the home.
- The child's needs fall within the EBD medium-priority profile the home is designed and equipped to address.
- The proposed group composition — the combination of three children — is therapeutically appropriate, balanced, and safe for all residents.
- A comprehensive group impact risk assessment has been or can be completed prior to admission.
- Sufficient, accurate, and up-to-date information is available about the child to ensure responsible placement planning.

Documentation Required

The following documents are requested from referring authorities at the time of referral:

- The most recent statutory LAC review report and up-to-date Care Plan.
- Full Social Care Chronology of significant events in the child's life.
- All current risk assessments — self-harm, missing from care, CSE/CCE, contextual safeguarding, and any other identified individual risk.
- Educational documentation — EHCP, PEP, most recent school reports, and attendance record.
- Full health documentation — medical history, current diagnoses, medications, allergies, immunisation records, and details of any ongoing specialist health appointments.
- All specialist assessment reports — CAMHS, psychology, psychiatry, speech and language therapy, occupational therapy.
- Placement Plan or draft Placement Plan.
- Missing from care history, frequency, risk level, and current Missing Person Plan.
- Full previous placement history, including all placement moves and the reasons for each ending.
- Court or legal orders relevant to the child's care, residence, or contact arrangements.
- Existing behaviour management plans and de-escalation profiles from previous placements.

Emergency Referrals

Whilst planned admissions are always preferred, the home recognises that genuine emergencies arise. Emergency referrals are considered where a child requires immediate accommodation and where an initial rapid assessment confirms the placement is safe and appropriate for both the child and any existing residents. Emergency admissions require: a rapid needs and impact assessment within 4 hours; minimum essential documentation; and a full Placement Planning Meeting within 72 hours of arrival.

7. Admissions

Broomsdale House is not a crisis intervention facility. The absolute minimum information required before any admission — including emergency admissions — is the child's social care chronology and most recent Care Plan. A formal Placement Planning Meeting is arranged within 72 hours of each child's arrival, involving the child's social worker, the placing local authority, the Registered Manager, and all key professionals.

Pre-Placement Visits

Where planning timescales allow, pre-placement visits are arranged for each child prior to their admission. These visits allow the child to explore the home at their own pace, meet key staff, see their bedroom, meet the other children where this is agreed and appropriate, and ask any questions about what life in the home will be like. Multiple visits are offered for children with high levels of transition anxiety. Transition booklets, visual guides, and photograph packs can be prepared for children who benefit from visual support.

Children's Guide and Welcome

Each child receives a personally prepared Children's Guide on arrival — covering daily routines, house rules, pocket money arrangements, household responsibilities, available activities, school arrangements, how to contact family and friends, and how to raise a concern or make a complaint. The guide is tailored to the child's individual age, reading level, and communication style. Within 48 hours of arriving, each child has a dedicated keyworker session to read through and discuss the Children's Guide in a warm, relaxed, and unhurried way.

First Week

The first week at the home focuses entirely on helping the child to settle in safely, feel genuinely welcome, and begin to build positive relationships with staff and the other residents. Formal assessment and care planning work begins in the second week, once the child has had time to begin settling. All urgent health, education, or safeguarding needs are addressed immediately and without delay from the moment of arrival.

8. GDPR & Data Protection

All information relating to the children in our care, their families, placing authorities, and other relevant persons is kept securely and treated in strict confidence in full accordance with the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018. Children are informed about how their personal information is used and stored in an accessible, age-appropriate manner during their induction to the home.

Information about a child is shared only where appropriate consent has been obtained — or where there is a safeguarding concern or legal duty that necessitates disclosure without consent. All staff sign comprehensive confidentiality agreements as a condition of their employment, which remain in full force both during and after their employment. Breaches of confidentiality are treated as serious disciplinary matters.

Personal data is collected, used, and retained only as necessary for the lawful purposes of the home's regulated care activities, in accordance with the data minimisation principles of UK GDPR. Records are retained in full accordance with statutory requirements under Schedule 4 of the Children's Homes (England) Regulations 2015 and the home's Data Protection Policy, and destroyed securely when no longer required.

Children and their families have a legal right to access their personal data under UK GDPR, subject to any limitations in the interests of safeguarding or the rights of others. The home maintains a comprehensive, annually reviewed Data Protection Policy covering: lawful bases for processing; data minimisation; security measures; retention periods; and procedures for managing subject access requests, data breaches, and data sharing.

9. Transitions & Discharges

Transitions and discharges are among the most emotionally significant and potentially anxiety-provoking events in a looked-after child's life. At Broomsdale House, we treat every transition — whether planned or unplanned — with the utmost care, sensitivity, and child-centredness. We understand that for many of our children, previous transitions have been abrupt, frightening, or poorly managed, and we are determined that every transition from this home is handled in a way that affirms the child's worth, respects their feelings, and prepares them as fully as possible for what comes next.

Transition planning begins as early as is genuinely appropriate in the child's placement, always with the child's individual circumstances, pace of development, and wishes and feelings at the centre. The process actively involves the child, their social worker, their IRO, family members where appropriate, the receiving placement or service, and all other relevant professionals. The pace and structure of all planned transitions is determined by what is in the best interests of the individual child.

Each child leaves the home with a personalised memory book — a carefully and lovingly prepared keepsake containing photographs of their time in the home, written memories, a record of their achievements and growth, keyworker letters, and messages from staff and peers where appropriate. This memory book is a permanent, meaningful tribute to the child's journey here and to the relationships they built.

Unplanned Endings

Where a placement ends unexpectedly or in emergency circumstances, the home works to ensure the transition is managed as safely, compassionately, and supportively as possible for the child concerned — even in the most difficult circumstances. A full, documented review of every unplanned placement ending is conducted by the Registered Manager and Responsible Individual within 72 hours. The learning from the review is shared with the placing authority and incorporated into the home's continuous improvement processes.

10. Equality & Diversity

Here at Broomsdale House, we celebrate our differences wholeheartedly and without reservation. Every child is unique — with their own strengths, interests, cultural identity, background, faith, and way of experiencing the world — and each deserves to be fully celebrated, affirmed, and respected for exactly who they are.

Batley and the surrounding Spen Valley area is one of the most culturally and religiously diverse communities in West Yorkshire. The town has a long and rich history of South Asian settlement — particularly Punjabi, Kashmiri, and Bangladeshi communities — as well as communities from Eastern Europe, the Caribbean, and many other parts of the world. This rich tapestry of culture, faith, language, and heritage is a genuine asset to children placed at Broomsdale House. The home celebrates Eid ul-Fitr, Eid ul-Adha, Diwali, Vaisakhi, Christmas, and many other cultural and religious festivals with warmth and genuine engagement. Halal, vegetarian, vegan, and all other dietary requirements are met as a matter of course. Children are actively supported to attend the mosque, temple, gurdwara, church, or other place of worship of their choice within the Batley and Kirklees area.

Staff receive comprehensive training in cultural awareness, religious sensitivity, unconscious bias, and anti-discriminatory practice. Every interaction, activity, and care decision is guided by our commitment to celebrating and affirming each child's individual identity in full.

We actively celebrate and affirm each child's racial and ethnic identity, gender identity, sexual orientation, faith and belief, disability, and neurodiversity. Our commitment to equality is active, reflective, and continuously improving — we regularly review our practices, policies, and language to ensure they reflect the highest standards of equitable, anti-discriminatory care.

11. Complaints

At Broomsdale House, we have a comprehensive, accessible, and actively promoted complaints procedure. Information about how to make a complaint is provided to every child in their Children's Guide on arrival, displayed prominently throughout the home, discussed individually in the first keyworker session within 48 hours, and shared with parents and placing authorities at the start of every placement.

We welcome complaints and treat them as a genuinely valued source of learning. No child will ever experience any negative consequence — in their care, their placement, or their relationships within the home — for raising a concern or making a complaint. Our complaints culture is one of genuine openness and continuous improvement.

Children may raise concerns or make complaints with any of the following:

- Their named keyworker — the first and most trusted point of contact for most concerns.
- Any member of the staff team — the home operates a genuine open-door culture at all times.
- The Registered Manager — available on request at any time.
- The Responsible Individual — contact details displayed and available to all children.
- Their Social Worker and Independent Reviewing Officer (IRO).
- An independent advocate — access is facilitated promptly, actively, and free of charge for any child who requests it or who would clearly benefit from it.
- External agencies: Childline (0800 1111, free and available 24 hours a day), NSPCC, the Children's Commissioner for England, and Ofsted.

All complaints are formally recorded and responded to in accordance with the home's comprehensive Complaint Procedure document, which is available to all children, families, professionals, and other stakeholders upon request.

12. Review of Quality of Care

At Broomsdale House, every child has the right and the genuine, regularly exercised opportunity to have their say on the quality of their care and the daily life of the home. Children's views are not an afterthought — they are a fundamental and active driver of the home's continuous improvement.

We consult with, listen to, and actively respond to children through a wide range of methods:

- Listen and Observe Every Day: Using every interaction, activity, mealtime, and moment of daily life to genuinely listen — children's words, silences, expressions, behaviours, and body language all carry important information about their experience.
- Keyworker Sessions: Regular one-to-one sessions providing dedicated, uninterrupted time for each child to share their views, feelings, preferences, and concerns in the safety of a trusted and consistent relationship.
- Residents' Meetings: Regular household meetings where all three children are individually invited and genuinely encouraged to contribute their views on menus, activities, house rules, and the home's daily routines.
- Questionnaires and Surveys: Regular quality assurance surveys in accessible, age-appropriate, and individualised formats — enabling children to share their honest views in a structured way.
- Suggestion Box: An anonymous suggestion and feedback box displayed prominently in the home — enabling children to share ideas, concerns, or compliments without having to speak directly to a member of staff.
- Regulation 44 Independent Visits: Monthly visits from an entirely independent person who meets individually with each child to gather their honest, unmediated views about their experience of living in the home.
- Formal Complaints: Treated as high-quality improvement information and analysed regularly for themes, patterns, and areas requiring change.

13. Enjoyment & Achievement

At Broomsdale House, we believe passionately that every child deserves a full, rich, and genuinely joyful childhood — and that recreational activities, creative experiences, sporting pursuits, and cultural adventures are not luxuries but essentials of healthy development, identity-building, and positive memory-making.

Activities are carefully planned in close collaboration with each individual child — taking fully into account their personal preferences, choices, cultural background, physical abilities, sensory considerations, and individual therapeutic needs. Risk assessments are completed for all activities. Children actively shape and choose their own activities rather than being passive recipients of a fixed programme.

Batley and the surrounding Spen Valley and Kirklees area offer an extraordinary wealth of activities and experiences for the children of Broomsdale House. Locally: Wilton Park, Batley's largest open green space, offers fields, play areas, and walking routes right on the doorstep. Batley town centre has a lively market, independent shops, cafes, and community events throughout the year. The Bulldogs Stadium is home to Batley Bulldogs RLFC — a beloved local institution and a brilliant community sporting outing. Batley Carr and the wider Spen Valley countryside offer walking, cycling, and outdoor exploration. Within easy reach: the Yorkshire Sculpture Park (Wakefield — 20 minutes), Xscape Yorkshire (Castleford — 20 minutes), Harewood House and Bird Garden (near Leeds — 30 minutes), Tropical World (Leeds — 30 minutes), Eureka! The National Children's Museum (Halifax — 25 minutes), and the full cultural and leisure offer of Leeds, Bradford, Huddersfield, and Wakefield city centres.

14. Education

Education is a genuine and active priority at Broomsdale House. We understand that many children with EBD — particularly those arriving with a medium-priority profile — will have experienced significant disruption to their educational history: periods of school exclusion or refusal, prolonged absences, trauma-related difficulties with concentration and learning, or a history of being failed by educational settings that did not understand or know how to support their needs. We are determined to change that experience for every child we support.

We teach children to value their education, their abilities, and their future possibilities — working persistently through every barrier they may face. This means actively advocating for the right educational provision for every child — whether that is mainstream school, specialist SEMH provision, alternative provision, an EHCP-funded specialist placement, or home-based learning — and working persistently with Kirklees Metropolitan Borough Council's Virtual School Head, school SENCos, designated teachers, and specialist providers to secure and maintain that provision.

Broomsdale House works proactively and in close partnership with Kirklees Metropolitan Borough Council's Virtual School Head for looked-after children, who holds statutory responsibility for monitoring and promoting the educational achievement of all Kirklees-placed children. Batley and the Spen Valley have a rich range of educational provision — from mainstream primary and secondary schools to specialist SEMH and alternative provision settings across the Kirklees area. The Kirklees Pupil Referral Unit, specialist Resource Bases, and a range of accredited alternative provision providers are all accessible within the local area. The home advocates persistently and assertively for every child's educational rights and will pursue specialist provision, EHCP funding, and alternative placement options with the same commitment with which it advocates for every other aspect of a child's welfare.

Staff actively participate in Personal Education Plan (PEP) reviews and EHCP annual reviews, advocate strongly for each child's educational rights, and ensure the home's daily routines consistently support and reinforce children's engagement with learning.

Within the home, education is embedded into daily life — not confined to school hours. Homework support, structured reading time, cooking and practical maths activities, creative projects, and life skills sessions all contribute to children's educational development and confidence. Every educational achievement — however incremental — is celebrated genuinely and enthusiastically by the whole staff team.

- Daily school attendance support — accompaniment to and from school where needed.
- Homework support and structured study time embedded into evening routines.
- PEP and EHCP review attendance and active advocacy.
- Facilitation of specialist educational psychology referrals and specialist provision applications.
- Home-based or online learning co-ordinated where no immediate school place is available.

- Extracurricular activities, school clubs, school trips, and enrichment actively supported and facilitated.

15. Health & Wellbeing

The physical, emotional, and mental health and wellbeing of the children in our care is a priority we take profoundly and practically seriously. Every effort is made to ensure all children receive the highest standard of health care, health promotion, and health support from the moment of their arrival in the home.

Broomsdale House works closely with Dewsbury and District Hospital (Mid Yorkshire Teaching NHS Trust) — the nearest district general hospital, just 3 miles from the home — as well as local GP practices, dental and optician services within Batley, and the NHS West Yorkshire Integrated Care Board's looked-after children health pathways. The Kirklees CAMHS service, accessed through the ICB, provides specialist mental health assessment and therapeutic support. The home builds close, proactive working relationships with all relevant healthcare professionals from the point of each child's admission.

Every child is registered with the local GP, dentist, and optician upon or as soon as possible after admission. Statutory health assessments are completed within required timescales. A comprehensive Health Folder is established for each child on arrival, documenting all health targets, appointments, assessments, and clinical care plans.

Healthy, nutritious, and culturally appropriate meals are prepared daily at the home with the active involvement of the children — respecting all dietary, cultural, religious, and individual food preferences and requirements at all times. Physical activity, outdoor exercise, and sports are actively promoted and embedded into daily and weekly routines as essential components of health and wellbeing.

The emotional and mental health of every child is central to the home's therapeutic model. Staff are trained to recognise signs of emotional distress, mental health deterioration, or mental health crisis — and to respond with therapeutic attunement, appropriate support, and timely escalation to professional services. Mental health first aid training is provided to all staff.

16. Positive Relationships

It is profoundly important for the children at this home to maintain positive contact with the important people in their lives — whether parents, siblings, extended family, former carers, friends, or other significant individuals — provided there are no legal restrictions or safety concerns in place. Contact arrangements are managed in full accordance with each child's Care Plan, the decisions of the placing authority and IRO, and any court or legal orders.

At this home, we:

- Help children develop socially aware and prosocial behaviour, providing consistent, warm, and non-judgmental support in navigating relationships with peers, adults, and the wider community.
- Meet each child's behavioural and emotional needs using PACE-model trauma-informed therapeutic parenting in every interaction and every moment of daily care.
- Support children to take age-appropriate and developmentally proportionate responsibility for their behaviour — framed always with understanding, not punishment.
- Communicate clearly, consistently, and with genuine conviction that bullying — in any form — is completely and unconditionally unacceptable in this home.
- Help children to develop the understanding, awareness, and practical skills to recognise, name, and withdraw from harmful, exploitative, coercive, or unhealthy relationships — including those involving peer influence, CSE, and CCE.
- Strive to earn each child's trust and respect through consistency, honesty, warmth, reliability, and genuine commitment to their welfare — recognising that for many EBD children, learning to trust adults again is itself one of the most significant therapeutic challenges they face.
- Model healthy, respectful, and boundaried relationships in all staff-to-staff and staff-to-child interactions — demonstrating through our own conduct what genuine positive relationships look, feel, and sound like.
- Actively facilitate and support family contact in accordance with care plans, court orders, and each child's own wishes and feelings — organising contact visits, telephone calls, video calls, and letter writing as appropriate.

17. Protection of Children

Broomsdale House maintains a comprehensive Safeguarding and Child Protection Policy, reviewed annually, that fully complies with all current national and local safeguarding legislation and guidance — including Working Together to Safeguard Children (2023), the Kirklees and West Yorkshire multi-agency safeguarding procedures, and the Kirklees Safeguarding Children's Partnership arrangements. All child protection concerns are escalated without delay to the appropriate professionals: the child's social worker, the placing authority, the Local Authority Designated Officer (LADO) where a staff member is implicated, Ofsted within required timescales, and West Yorkshire Police where the threshold for police involvement is met.

Any CCTV installed at the property covers only the external areas of the home for security and safeguarding purposes, in full compliance with UK GDPR and the Information Commissioner's Office guidance. External CCTV cameras cover the property's external perimeter only — never internal rooms or private spaces. Children are clearly and honestly informed that external CCTV is in operation. Written consent from placing authorities is obtained prior to or upon admission in relation to any monitoring arrangements.

All staff hold enhanced DBS clearance obtained before commencing any work with children. DBS checks are renewed in accordance with the home's safer recruitment policy. A Single Central Record of all safer recruitment checks is maintained and kept current.

18. Safeguarding of Children and Young People

"Safeguarding is paramount — safeguarding is more important than anything" is the defining culture at Broomsdale House and across the whole organisation. Every member of the staff team — from the Responsible Individual and Registered Manager to the newest Residential Care Worker — holds safeguarding as their primary, non-negotiable professional responsibility.

The Registered Manager and the Responsible Individual are the named individuals responsible for leading safeguarding practice at the home. Their names, roles, and contact details are displayed prominently throughout the home and are available upon request. The home operates in close partnership with Kirklees Metropolitan Borough Council's Children's Social Care, the Kirklees Safeguarding Children's Partnership, West Yorkshire Police, and the NHS West Yorkshire ICB's looked-after children safeguarding teams.

Key safeguarding principles at this home:

- Children's views, wishes, feelings, and choices are listened to, respected, carefully recorded, and given real and substantive weight in all decisions that affect them.
- Children are made to feel genuinely valued, respected, visible, and celebrated — and staff actively support the development of each child's self-esteem, positive personal identity, and sense of personal safety.
- A clear, effective, and actively promoted complaints procedure that is fully accessible to every child in the home.
- Rigorous safer recruitment — enhanced DBS, full employment history verification, minimum two professional references checked before employment, Single Central Record maintained.
- A clear, comprehensive, and actively promoted whistleblowing procedure enabling all staff to raise legitimate concerns without fear of prejudice, detriment, or victimisation.
- Regular, high-quality safeguarding training for all staff at induction and annually.
- Regular safeguarding supervision for all staff — providing space for reflective practice, professional support, and the safe disclosure of concerns.
- Consistent, genuine respect for diversity in all aspects of safeguarding practice.

19. Missing Children

Broomsdale House has a comprehensive, regularly reviewed, and actively practised Missing Children's Policy. Prior to each child's admission, a missing from care risk assessment is completed — incorporating the child's individual history, known triggers, previous missing episodes, relevant intelligence, and the specific safeguarding context of the Batley and West Yorkshire area, including county lines, CSE, and CCE risks.

The home shares joint responsibility with West Yorkshire Police regarding situations when a looked-after child goes missing from the property. Return to Care interviews are facilitated for all children following missing episodes, in full accordance with local authority and West Yorkshire Police requirements.

Safety measures in place:

- Each child's individual risk assessment records a clear, agreed, and regularly reviewed level of supervision appropriate to their needs, vulnerability, history, and current risk.
- Children are never left without appropriate adult supervision consistent with their individual risk level.
- Extra vigilance is always maintained in busy, unfamiliar, or higher-risk environments outside the home.
- Staff familiarise themselves with venues in advance of taking children there.
- Each child has a current, detailed, and regularly reviewed Missing Person's Plan — shared with West Yorkshire Police and the placing authority.
- All missing episodes are reported immediately to West Yorkshire Police, the Registered Manager, and the child's social worker and placing authority.
- Staff receive specific training in county lines indicators, CSE and CCE awareness, and West Yorkshire-specific safeguarding risks.

20. Behaviour Management

The aim of our Behaviour Management approach is to ensure that positive, prosocial, and safe behaviour is consistently promoted, and that all measures of control, discipline, or restraint used at the home are necessary, proportionate, and lawful. We begin from the fundamental and unshakeable principle that behaviour is a form of communication — and that for children with EBD who have experienced trauma, challenging behaviour is almost always a direct communication of an unmet need or overwhelming feeling.

Our Positive Behaviour Support (PBS) framework, underpinned by the PACE model, ensures that every child's behaviour is understood in context. Each child has an individual PBS plan and a personalised de-escalation profile, developed collaboratively with the child, their social worker, and relevant professionals.

No measure of control or discipline that is excessive, punitive, or humiliating is used at this home. Expressly prohibited in accordance with Regulation 19(2): corporal punishment; deprivation of food, drink, warmth, or sleep; restriction of contact with family, social workers, or advocates; humiliating or demeaning sanctions; and any disproportionate financial penalty.

Physical restraint — using Team Teach techniques exclusively — is used only as an absolute last resort where a child is in immediate danger of serious injury. All physical interventions are: conducted only by trained and authorised staff; fully recorded within 24 hours; subject to post-incident debrief with the child; reviewed by the Registered Manager within 48 hours; and reported to Ofsted and the placing authority within required timescales.

21. Health and Safety

Health and safety policies and procedures at this home comply fully with the Health and Safety at Work Act 1974 and the Children's Homes (England) Regulations 2015. All staff receive comprehensive training at induction and regular refresher training. Risk assessments are completed for all activities and environments.

- Weekly: fire alarm and smoke detector testing; emergency light checks; medication storage audit.
- Monthly: full internal health and safety inspection; first aid kit check; fire extinguisher visual; food hygiene audit; external area safety check.
- Quarterly: full fire safety review; risk assessment review; COSHH audit.
- Annually: external fire risk assessment by qualified assessor; gas safety certificate; electrical installation report; PAT testing; legionella risk assessment.

22. Fire Safety

This home is fully compliant with the Regulatory Reform (Fire Safety) Order 2005 and all applicable British Standards and Children's Homes Regulations fire safety requirements.

Fire safety arrangements include:

- A comprehensive written fire risk assessment by a qualified fire risk assessor — reviewed annually or whenever significant changes occur.
- An interlinked smoke and heat detection and alarm system throughout the property — tested weekly and fully serviced annually.
- CO2 and dry powder fire extinguishers and a fire blanket installed at appropriate locations — serviced annually.
- Clear, unobstructed, and signed fire escape routes throughout all areas of the property.
- Emergency lighting on all escape routes — tested monthly and serviced annually.
- Fire evacuation drills conducted at least monthly at varying times — with full records maintained.
- Personal Emergency Evacuation Plans (PEEPs) for every child and staff member.
- Fire safety awareness training for all staff at induction and annually.
- All children introduced to fire evacuation procedures and routes as part of their induction.
- A Fire Log Book maintained, recording all checks, drills, tests, services, and incidents.

23. Medication Management

This home operates a comprehensive, rigorous, and regularly reviewed system for the safe storage, administration, and recording of all medications in full compliance with Regulation 23 of the Children's Homes (England) Regulations 2015.

Key medication management arrangements:

- All medication stored securely in a locked, clearly labelled cabinet or refrigerator (where required) — accessible only to trained and authorised staff.
- Medication administered only by trained and formally authorised staff members.
- Every administration recorded accurately and contemporaneously on individual Medication Administration Records (MARs).
- Regular medication stock counts and audits conducted and recorded by the Registered Manager.
- Controlled drugs held in an enhanced-security locked safe with a separate Controlled Drug Register and dual-signature recording for every administration.
- Self-administration supported where assessed as safe and appropriate — with monitoring and recording.
- Medication errors immediately recorded, reported to the prescribing clinician, and reported to Ofsted where required.
- Unused, expired, or discontinued medication returned to the dispensing pharmacy for safe disposal.

24. Location Risk Assessment

In full compliance with Regulation 46, Broomsdale House maintains a comprehensive and up-to-date Location Risk Assessment for the 23 Broomsdale Road, Batley, WF17 6PF property and the surrounding Batley area. This assessment is completed prior to the home opening, reviewed annually, and updated whenever circumstances change.

The Location Risk Assessment addresses:

- The immediate neighbourhood of the property, the surrounding Batley streets, and the broader Kirklees context.
- Local crime statistics and community safety data provided by West Yorkshire Police.
- Proximity to schools, health services, CAMHS, community facilities, public transport, and cultural resources.
- West Yorkshire-specific safeguarding risks — county lines, CSE/CCE, and exploitation intelligence.
- Environmental factors including proximity to known risk locations or persons of concern.
- Individual risks arising from the needs, history, and circumstances of each child placed at the home.

The Location Risk Assessment is shared with placing authorities prior to each admission and with Ofsted as required. All identified risks are addressed through proportionate, targeted management strategies embedded in each child's individual risk assessment and care plan.

25. Regulation 44 Independent Visits

In full compliance with Regulation 44, this home receives monthly visits from an appointed independent person with no professional or personal connection to the home's management, staff, or registered provider.

Purposes of Regulation 44 visits:

- Interviewing each child individually and in private, with their consent, to gather their honest and unmediated views about their experience.
- Inspecting the physical premises and assessing the environment's safety and suitability.
- Examining all relevant records relating to the conduct of the home.
- Interviewing staff as appropriate to assess the culture and practice of the home.
- Producing a detailed written report on the quality and conduct of the home.

Each Regulation 44 report is shared with the registered provider, Ofsted, and relevant placing authorities. All recommendations are addressed promptly by the Registered Manager, with actions documented for follow-up.

26. Regulation 45 Quality of Care Review

In compliance with Regulation 45, the registered provider conducts a comprehensive review of the quality of care at least every six months. The review considers: the Ofsted Quality Standards; Regulation 44 findings; feedback from children, families, placing authorities, and staff; all complaints and notifications; staff training; and outcomes for children. A written Regulation 45 Report and improvement plan are produced.

27. Notifications to Ofsted

In full compliance with Regulation 40, the home notifies Ofsted of all specified events within 24 hours of occurrence using the appropriate notification form.

Notifiable events include:

- Death of a child looked after at the home.
- Serious illness or serious accident affecting a child.
- A child going missing from the home.
- Serious safeguarding concern or allegation against a staff member.
- Any incident requiring police involvement.
- Outbreak of any notifiable infectious disease.
- Any serious incident significantly affecting the welfare of a child.
- Certain uses of physical restraint as specified in Regulation 40.
- Significant change to management structure, including departure of the Registered Manager.

28. Records and Record Keeping

In full compliance with Regulation 36 and Schedule 4, this home maintains comprehensive, accurate, contemporaneous, secure, and well-organised records across all aspects of its operation.

Records maintained include:

- Individual case records for each child — daily logs, significant event records, and all case correspondence.
- Behaviour management records — all incidents, sanctions, consequences, and physical interventions.
- Medication Administration Records (MARs); Controlled Drug Register; medication audit records.
- Staff personnel files — recruitment documentation, qualifications, training records, DBS checks, supervision notes.
- Central complaints and representations log — all complaints, actions, and outcomes.
- Fire safety log — all drill records, test records, and inspection reports.
- Health and safety inspection records, risk assessments, maintenance logs, and contractor records.
- Financial records — each child's pocket money account, savings account, and expenditure on their behalf.
- Visitor log — all persons entering and leaving the home.
- Regulation 44 and Regulation 45 reports.

29. Fitness of Premises

In full compliance with Regulation 25, this home is maintained at all times to a standard that is appropriate, safe, and welcoming for the residential care of children. The premises provide adequate and appropriate space for each child's individual needs, for communal living and leisure, and for the management requirements of the home.

A programme of routine maintenance inspections, planned preventive maintenance, and responsive repairs ensures the property is always kept in good order. The physical environment is formally reviewed through monthly health and safety inspections and monthly Regulation 44 independent visits. The home has secure and appropriate storage for medication, children's valuables, confidential records, and hazardous materials.

30. Staffing and Workforce Development

In full compliance with Regulations 32 and 33, Broomsdale House at all times maintains the appropriate number of suitably qualified and experienced staff to meet the needs of the children in its care, and invests continuously in the training, development, support, and wellbeing of every member of its workforce.

Staffing Model — Maximum 3 Staff On-Site at Any Time

- 2 Residential Care Workers on duty during waking hours — providing a 2:3 therapeutic ratio for three EBD children.
- 1 Residential Care Worker on sleep-in or waking night duty overnight in the dedicated staff room.
- 1 Home Manager attending on weekdays from approximately 9:00am — providing operational leadership and management oversight.
- Shift changeover staggered — one RCW at a time — at approximately 8:30am daily, lasting 15–30 minutes. Maximum of 3 staff is never exceeded simultaneously.
- 6 Residential Care Workers on a staggered rota — providing continuous, unbroken 24/7 cover.
- On-call senior management available at all times outside normal office hours.

Safer Recruitment

- Enhanced DBS for all staff and volunteers — obtained before commencing any work with children.
- Full employment history verification — all gaps in employment history explored and accounted for.
- Minimum two professional references checked and verified before any offer of employment.
- Single Central Record maintained and current for all staff, volunteers, and regular contractors.
- Safer recruitment training completed by all managers involved in hiring.

Staff Induction and Development Programme

- Day 1: Organisational values and ethos; safeguarding; equality and diversity; UK GDPR; emergency procedures; key policies.
- Days 2–3: Induction to the home — children's files, care plans, risk assessments, daily routines, staff team.
- Shadow shifts: Minimum 2 before working independently; more offered where beneficial.
- 6-month probationary period with formal supervision every 2 weeks throughout.

- Post-probation: Formal supervision minimum every 4 weeks; annual appraisal linked to a personal development plan.
- Mandatory annual training programme — reviewed and updated annually — covering all aspects of residential childcare practice.

31. Management

Responsible Individual

The Responsible Individual holds ultimate accountability for the quality, safety, governance, and regulatory compliance of the home. The RI provides active strategic oversight — regular oversight visits; scrutiny of all Regulation 44 reports; sign-off on Regulation 45 reviews; close and regular communication with the Registered Manager; and full discharge of all registered provider legal obligations under the Children's Homes (England) Regulations 2015.

Proposed Registered Manager

The Proposed Registered Manager holds day-to-day operational responsibility for the management, organisation, and delivery of care. The Registered Manager must hold, or be working towards within the required regulatory timescale, a Level 5 Diploma in Leadership and Management for Residential Childcare. They must demonstrate proven competence in residential care management, specialist knowledge of EBD at a medium priority level, and deep knowledge of the Children's Homes Regulations and Quality Standards.

Residential Care Workers

Residential Care Workers are recruited first and foremost for their values — warmth, compassion, reliability, resilience, and genuine commitment. All hold or are working towards a Level 3 Diploma in Residential Childcare within an agreed timescale. All receive specialist training in EBD, PACE model therapeutic parenting, PBS, and Team Teach physical intervention before working independently with children.

32. Staff Structure

Role	Designation	Qualifications	Experience
MANAGEMENT AND GOVERNANCE			
Responsible Individual	RI	As required by Regulation 32	Senior governance experience in regulated residential childcare
Registered Manager	Reg. Manager	Level 5 Diploma in Leadership & Management for Residential Childcare (or within timescale)	Min. 2 years' management experience; EBD specialism
Deputy Manager	Deputy	Level 3 Diploma minimum; shift leadership capability	Min. 2 years' frontline residential care experience
RESIDENTIAL CARE WORKERS — Staggered Rota (Max 3 on-site: 2 RCWs on duty + 1 Manager weekdays)			
Residential Care Worker 1	RCW	Level 3 Diploma in Residential Childcare (or working towards within agreed timescale)	Values-led; childcare or related field experience; commitment to PACE therapeutic practice
Residential Care Worker 2	RCW	Level 3 Diploma in Residential Childcare (or working towards within agreed timescale)	Values-led; childcare or related field experience; commitment to PACE therapeutic practice
Residential Care Worker 3	RCW	Level 3 Diploma in Residential Childcare (or working towards within agreed timescale)	Values-led; childcare or related field experience; commitment to PACE therapeutic practice
Residential Care Worker 4	RCW	Level 3 Diploma in Residential Childcare (or working towards within agreed timescale)	Values-led; childcare or related field experience; commitment to PACE therapeutic practice
Residential Care Worker 5	RCW	Level 3 Diploma in Residential Childcare (or working towards within agreed timescale)	Values-led; childcare or related field experience; commitment to PACE therapeutic practice
Residential Care Worker 6	RCW	Level 3 Diploma in Residential Childcare (or working towards within agreed timescale)	Values-led; childcare or related field experience; commitment to PACE therapeutic practice

33. Updates and Reviews

This Statement of Purpose is reviewed annually or whenever there are significant changes to the service provision, staffing model, children in placement, the property, or the applicable legislative or regulatory framework. It is amended promptly to ensure it accurately and fully reflects the home's current provision, staffing, ethos, and best practice in residential childcare.

The reviewed Statement of Purpose is submitted to Ofsted as required under Regulation 16 and is made available upon request to: children and young people placed at the home; their families and persons with parental responsibility; placing local authorities and Independent Reviewing Officers; and any other relevant professional or stakeholder. It is displayed at the home and held in the home's records.

Completed by	Date	Signature
Registered Manager	August 2026	

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