

Frank House

Statement of Purpose

September 2026
38 Frank Lane, Dewsbury, WF12 0JN

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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1. Contact Details

Home Address

Home Name	Frank House
Home Type	3-Bedded Residential Children's Care Home
Specialism	Emotional & Behavioural Difficulties (EBD) — Medium Priority
Address	38 Frank Lane, Dewsbury, WF12 0JN
Age Range	8–17 years
Capacity	Up to three (3) children

Registered Manager

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

38 Frank Lane, Dewsbury, WF12 0JN

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

Frank House is situated at 38 Frank Lane in Dewsbury, within the Kirklees district of West Yorkshire. The home lies in the Thornhill area of Dewsbury — a settled, well-established residential community with local schools, shops, parks, playing fields, and sports clubs close at hand. Dewsbury is a diverse and friendly town with long-established communities of many different heritages. Frank Lane sits within a quiet residential neighbourhood, providing a settled, community-integrated, and genuinely homely setting for the three children who will call Frank House their home.

Dewsbury is well connected across West Yorkshire and beyond. Dewsbury railway station, on the trans-Pennine main line, provides direct services to Leeds, Huddersfield, and Manchester, and the M1 and M62 motorways are close by. This connectivity places Frank House within easy reach of the full breadth of specialist health, education, therapeutic, and community services across Kirklees and West Yorkshire — including specialist CAMHS, the full range of SEND educational provision, and the cultural and recreational resources of Leeds and the wider region.

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 Dewsbury location is appropriate, safe, and well-resourced for a residential children's care home.

Frank 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. We refer to the children in our care as 'children' throughout this document.

Frank House specialises in supporting children with emotional and behavioural difficulties (EBD) at a medium priority level — children who require a structured, consistent, boundaried, and therapeutically attuned residential environment to make meaningful and lasting progress. The 3-bedded model provides a small, intimate, and highly individualised form of residential therapeutic care, enabling staff to develop an exceptionally deep and consistent therapeutic knowledge of each child.

The 3-bedded model offers powerful therapeutic advantages: the extraordinary intimacy and intensity of the care relationship; the complete absence of complex group dynamics; and the ability to tailor every aspect of the home's environment, routine, and therapeutic programme to the specific and individual needs of the three children in placement. This is genuinely bespoke, highly individualised residential care.

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.

Exclusion Criteria

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

- Children with significant addiction to drugs or alcohol requiring specialist inpatient substance misuse treatment.
- Children who set fires — current or recent active fire-setting behaviour.
- Children requiring continuous 24-hour psychiatric supervision or inpatient-level clinical management.
- Children whose individual risk profile would place the other residents at unacceptable or unmanageable risk.
- Children whose needs cannot be safely met alongside the current resident in the home.

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

3. Ethos

Our ethos at Frank House is to provide personalised, high-quality therapeutic care within a warm, nurturing, and genuinely family-like 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 a small and intimate form of residential children's care. With only three children and a dedicated staff team, the therapeutic relationships that develop at Frank House are among the deepest and most consistent available in any residential setting. Staff truly know each child — their strengths, their history, their triggers, their humour, their dreams — in a way that simply is not possible in larger group settings.

We believe that every child is a unique individual with their own strengths, interests, cultural identity, and way of experiencing the world. At this home, children are known, celebrated, and supported to discover and build on their own remarkable potential. The views, wishes, and feelings of all three children are central to everything we do.

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 enables staff to respond to every challenging behaviour with curiosity and empathy rather than reaction — looking beneath the surface to understand what the child is communicating, and responding in ways that help them feel genuinely heard, understood, and safe.

We are committed to providing a consistent, warm, stable, and genuinely caring team of adults who show up reliably and warmly for each child — day after day, week after week. In the 3-bedded setting, this consistency of relationship is exceptionally powerful.

4. Our Aims, Outcomes & Methods

Our Aims

Frank House aims to provide a safe and welcoming environment that genuinely feels like home. The small 3-bedded model achieves this naturally — three children, a small dedicated team, and a warm family-like routine create a genuinely intimate and therapeutic home environment.

We aim to prepare every child for their future. Every child who lives here has the right to a childhood as full, joyful, and rich in positive experience as possible — and the right to leave with greater emotional resilience, stronger self-knowledge, and a clearer sense of who they are and what they are capable of. We aim to prepare children for:

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

Our Outcomes

- High-quality, individually tailored therapeutic care supporting each child with EBD to make significant and meaningful progress across all Ofsted Quality Standards domains.
- Comprehensive Individualised Care Plans setting meaningful, child-centred goals based on each child's views, wishes, choices, and needs.
- Robust, evidence-based safeguarding procedures protecting every child from any form of harm — the non-negotiable foundation of all we do.
- Regular review and adaptation of each child's Care Plan as they grow and their needs change.
- Effective, collaborative working relationships with each child's school, alternative provision, or specialist educational setting.
- An absolute commitment to equality, diversity, inclusion, and anti-discriminatory practice.
- Each child developing practical, social, emotional, and life skills building confidence, independence, and readiness for the future.
- Each child supported to develop a positive personal identity — affirming their racial, cultural, religious, gender, and individual identity in every interaction.

Our Methods

The staff team at Frank House use therapeutic parenting approaches in every interaction with all three children throughout every day. All staff are comprehensively trained in PACE — the trauma-informed model of care developed by Dr Dan Hughes. PACE is not a training course or set of techniques — it is the whole-home culture and philosophy of this home, shaping how every staff member thinks, feels, communicates, and engages with all three children in every moment of daily life.

In addition to PACE: individual Positive Behaviour Support (PBS) plans for each child; personalised de-escalation profiles specific to each child's triggers and effective strategies; life skills development embedded into daily routines; trauma-informed attachment-aware practice; and meaningful multi-agency collaboration with all health, education, and social care professionals.

Physical restraint — Team Teach techniques only — is used exclusively as an absolute last resort where immediate physical safety is at risk. All such interventions are fully recorded, reviewed within 24 hours, debriefed with the child, and reported within required timescales.

5. Our Home

Frank House is a well-maintained, thoughtfully adapted, and beautifully furnished 3-bedded residential care home at 38 Frank Lane, Dewsbury, WF12 0JN. The property has been prepared to the highest possible standard to provide a warm, nurturing, and therapeutically designed home for three children with emotional and behavioural difficulties. Every room and space has been considered and designed with the children's needs, comfort, dignity, safety, and wellbeing in mind.

Ground Floor

- **Staff Room/Sleep-In:** The former living room is used as the staff room and overnight sleep-in room for the Residential Care Worker sleeping in — ensuring immediate availability throughout the night. It is staff-only and not used by the children as living space.
- **Kitchen and Dining Area:** A fully equipped kitchen and dedicated dining space where all three children share mealtimes in a warm, family-style setting. Children are actively involved in meal planning and cooking as part of their life skills development.
- **Office:** The former reception room, beside the play room, is used solely as the management and administrative office for the Registered Manager. It is staff-only, kept locked when unattended, and is not available to the children as living space.
- **Toilet:** Ground floor toilet facilities for children and staff throughout the day.
- **Play Room/Study (Children's Lounge):** A spacious room running the depth of the house, used as the children's lounge and play room — furnished with quality seating, books, games, and leisure resources tailored to the ages and interests of all three children, with space for homework and quiet study. It is the heart of the home.
- **Conservatory:** A bright additional living space opening onto the garden, used for relaxation, games, and family time.
- **Utility Room:** Laundry facilities, used as part of each child's life skills development.

First Floor

- **Bedroom 1:** A generous, private, beautifully furnished, and fully personalised bedroom with its own en-suite, exclusively for the first child in placement — decorated to reflect that individual child's identity, tastes, interests, and preferences. Their private sanctuary within the home.
- **Bedroom 2:** A generous, private bedroom with fitted wardrobes, exclusively for the second child in placement — equally personalised, high quality, and private. Each child's bedroom is completely their own.
- **Bedroom 3:** A generous, private bedroom exclusively for the third child in placement — equally personalised, high quality, and private.
- **Family Bathroom:** First floor family bathroom with appropriate privacy measures, serving the children's bedrooms. A first floor walk-in wardrobe provides additional secure storage.

Each child's bedroom is furnished to a high standard, and all three children are warmly invited and supported to personalise their room upon arrival and throughout their placement. Upon arrival, every child receives a personalised welcome basket. Frank House is fully compliant with all applicable health and safety and fire safety regulations. The physical environment is reviewed through monthly health and safety inspections and monthly Regulation 44 independent visits.

The garden at Frank House provides a safe, private, well-maintained outdoor recreational space for all three children — a genuinely valued and therapeutic outdoor environment.

6. Referrals

Referral Criteria

Frank House operates a rigorous referral assessment process. All potential referrals are carefully assessed by the Registered Manager before any placement agreement is made. In the 3-bedded model, compatibility between the three children is of the highest possible importance — the composition of a small peer group directly and immediately affects every aspect of each child's daily experience. No referral is accepted without a comprehensive assessment confirming:

- The home can effectively, safely, and therapeutically meet the child's individual needs within its model and physical environment.
- The proposed placement will not adversely affect the welfare, safety, dignity, or wellbeing of the children currently placed.
- The child's needs fall within the EBD medium-priority profile the home is designed to address.
- The three-person group composition is therapeutically appropriate, balanced, and genuinely safe for all residents.
- A comprehensive group impact risk assessment has been completed prior to admission.

Documentation Required

- Most recent statutory LAC review report and up-to-date Care Plan.
- Full Social Care Chronology of significant events.
- All current risk assessments — self-harm, missing from care, CSE/CCE, contextual safeguarding.
- Educational documentation — EHCP, PEP, school reports, and attendance record.
- Full health documentation — medical history, diagnoses, medications, allergies, immunisations.
- All specialist assessment reports — CAMHS, psychology, psychiatry, speech and language.
- Placement Plan or draft Placement Plan.
- Missing from care history, frequency, risk level, and current Missing Person Plan.
- Full previous placement history and reasons for each ending.
- Court or legal orders relevant to care, residence, or contact.

Emergency Referrals

Emergency referrals are considered where a child requires immediate accommodation and where an initial rapid assessment indicates the placement is safe and appropriate for both the child and the existing residents. Emergency admissions require: a rapid needs and impact assessment within 4 hours; minimum essential documentation; and a Placement Planning Meeting within 72 hours of arrival.

7. Admissions

Frank House is not a crisis intervention facility. The absolute minimum information required before any admission 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.

Pre-Placement Visits

Where planning timescales allow, pre-placement visits are arranged for each child — enabling them to explore the home, meet key staff, see their bedroom, and meet the other children at an agreed and appropriate pace. Multiple visits are offered for children with high levels of transition anxiety.

Children's Guide and Welcome

Each child receives a personally prepared Children's Guide on arrival — covering daily routines, house rules, pocket money, activities, school arrangements, how to contact family, and how to raise a concern or complaint. Within 48 hours of arriving, a dedicated keyworker session reads through and discusses the guide with the child.

First Week

The first week focuses entirely on helping the child to settle safely, feel genuinely welcome, and begin to build positive relationships with staff and the other residents. All urgent health, education, or safeguarding needs are addressed immediately from the moment of arrival.

8. GDPR & Data Protection

All information relating to the children in our care, their families, and relevant persons is kept securely and treated in strict confidence in full accordance with UK GDPR and the Data Protection Act 2018. Information is shared only where appropriate consent exists or where there is a safeguarding necessity. All staff sign comprehensive confidentiality agreements as a condition of employment.

Children and families have the legal right to access their personal data under UK GDPR, subject to any safeguarding limitations. The home maintains a comprehensive, annually reviewed Data Protection Policy covering all aspects of lawful data processing.

9. Transitions & Discharges

Frank House treats every transition — whether planned or unplanned — with the utmost care, sensitivity, and child-centredness. In the 3-bedded model, the depth of the therapeutic relationships makes transitions particularly significant — children have received highly individualised, consistent care and transitions require careful, unhurried, and deeply respectful management.

Each child leaves the home with a personalised memory book — a lovingly prepared keepsake containing photographs, written memories, a record of achievements and growth, keyworker letters, and messages. This is a permanent tribute to the child's journey and to the relationships they built.

Unplanned Endings

Where a placement ends unexpectedly, the home works to ensure the transition is managed as safely and compassionately as possible. A full review is conducted within 72 hours. In the 3-bedded model, any unplanned ending also has a direct and immediate impact on the remaining resident — this is managed with particular sensitivity, additional therapeutic support, and close communication with that child's placing authority.

10. Equality & Diversity

Frank House celebrates difference wholeheartedly and without reservation. Every child is unique — with their own strengths, cultural identity, background, faith, and way of experiencing the world — and each deserves to be fully celebrated and respected for exactly who they are.

Kirklees is one of the most culturally diverse districts in West Yorkshire. Dewsbury in particular has large and long-established British South Asian communities — including families of Indian Gujarati and Pakistani heritage — alongside White British, Eastern European, African, Caribbean, and many other communities. Frank House embraces this diversity wholeheartedly. The home celebrates Eid ul-Fitr, Eid ul-Adha, Diwali, Navratri, Vaisakhi, Christmas, Hanukkah, and all other cultural and religious occasions meaningful to the children in its care. Halal, kosher, vegetarian, vegan, and all cultural and dietary requirements are met as an absolute standard. Children are actively supported to attend the mosque, temple, gurdwara, synagogue, church, or any other place of worship of their choice within Kirklees and across West Yorkshire.

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.

11. Complaints

Frank House has a comprehensive, accessible, and actively promoted complaints procedure. Information is provided to every child in their Children's Guide, displayed throughout the home, and discussed in the first keyworker session.

We welcome complaints as genuinely valued learning. No child will experience any negative consequence for raising a concern or making a complaint. In the 3-bedded model, the staff team's intimate knowledge of all three children means that subtle signs of unhappiness or concern are noticed and addressed proactively.

Children may raise concerns with: their keyworker; any member of staff; the Registered Manager; the Responsible Individual; their Social Worker and IRO; an independent advocate; Childline (0800 1111); and Ofsted.

All complaints are recorded and responded to in accordance with the home's separate, detailed Complaint Procedure document.

12. Review of Quality of Care

At Frank House, all three children have the right and the genuine opportunity to have their say on the quality of their care and the daily life of the home. In a 3-bedded home, the intimacy of the setting means that children's views are gathered informally and continuously as well as through formal mechanisms.

Methods for gathering children's views:

- Daily keyworker check-ins: regular, informal, and child-led conversations about how each child is feeling.
- Weekly residents' meetings: all three children individually invited to share views on menus, activities, and routines.
- Quality assurance questionnaires: regular surveys in accessible formats.
- Suggestion box: an anonymous and prominent feedback box available to all three children at all times.
- Regulation 44 independent visits: monthly visits by an entirely independent person who meets individually with each child.
- Formal complaints: treated as high-quality improvement information.

13. Enjoyment & Achievement

At Frank House, we believe every child deserves a full, rich, and genuinely joyful childhood — and that recreational activities, creative experiences, sporting pursuits, and cultural adventures are essentials of healthy development.

Activities are planned in close collaboration with each individual child — taking account of their personal preferences, cultural background, physical abilities, sensory considerations, and individual therapeutic needs. In the 3-bedded model, activities can be tailored completely individually — children do not need to compromise on their interests.

Frank House and the wider Kirklees area offer a wide range of activities and experiences. Locally: Crow Nest Park in Dewsbury, with open green spaces, play areas, and walks; the playing fields, sports facilities, and rugby and cricket clubs of Thornhill; and Dewsbury Sports Centre. Within West Yorkshire and beyond: Leeds city centre — around 15 minutes by train from Dewsbury — with the Royal Armouries, Leeds City Museum, and a wide range of shops and leisure venues; Yorkshire Sculpture Park; the National Coal Mining Museum for England; Eureka! The National Children's Museum in Halifax; and day trips to the Yorkshire Dales, the Peak District, and the Yorkshire coast.

14. Education

Education is a genuine priority at Frank House. We understand that many children with EBD will have experienced significant disruption to their educational history. We are determined to change that experience for every child we support.

Frank House works in close partnership with Kirklees Council's Virtual School Head for looked-after children, and with the Virtual School of each child's placing authority, who hold statutory responsibility for promoting and monitoring the educational achievement of looked-after children. Kirklees has a comprehensive range of educational provision — including mainstream primary and secondary schools in and around Dewsbury, specialist SEMH provision, and access to alternative provision and EHCP-funded placements across West Yorkshire. Frank House advocates persistently for every child's educational rights — attending PEP reviews, pursuing EHCP provision, and working with designated teachers, Virtual School staff, and educational psychologists.

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 children's engagement with learning.

- Daily school attendance support — accompaniment where needed.
- Homework support and structured study time in evening routines.
- PEP and EHCP review attendance and active advocacy.
- Home-based or online learning co-ordinated where no immediate school place is available.
- Every educational achievement celebrated genuinely and enthusiastically.

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 three children receive the highest standard of health care, health promotion, and health support from the moment of their arrival.

Frank House works closely with Dewsbury and District Hospital (Mid Yorkshire Teaching NHS Trust), Halifax Road, Dewsbury — the nearest district general hospital, approximately 3 miles from the home — and with Pinderfields Hospital, Wakefield, for major emergency care. The South West Yorkshire Partnership NHS Foundation Trust (SWYPFT) provides CAMHS for children in the Kirklees area, commissioned through NHS West Yorkshire ICB. Specialist paediatric provision — including Leeds Children's Hospital and Sheffield Children's Hospital — is within reach for any specialist clinical needs.

Every child is registered with the local GP, dentist, and optician upon admission. Statutory health assessments are completed within required timescales. A comprehensive Health Folder is established for each child on arrival.

Healthy, nutritious, and culturally appropriate meals are prepared daily with all three children's active involvement. Physical activity, outdoor exercise, and sports are actively promoted. The emotional and mental health of every child is central to the home's therapeutic model.

16. Positive Relationships

All three children at this home are supported to maintain positive contact with the important people in their lives — provided there are no legal restrictions or safety concerns. Contact arrangements are managed in full accordance with each child's Care Plan and any court or legal orders.

At this home, we:

- Help all three children develop socially aware and prosocial behaviour through consistent, warm, and non-judgmental therapeutic parenting.
- Meet each child's behavioural and emotional needs using PACE-model trauma-informed therapeutic parenting in every interaction.
- Communicate clearly and consistently that bullying — in any form — is completely and unconditionally unacceptable.
- Help children to recognise and withdraw from harmful, exploitative, or coercive relationships.
- Model healthy, respectful, and boundaried relationships in all staff interactions.
- Actively facilitate and support family contact in accordance with care plans and each child's wishes.
- Support the peer relationship between the three residents — a particularly significant and carefully managed aspect of life in a 3-bedded home.

17. Protection of Children

Frank House maintains a comprehensive Safeguarding and Child Protection Policy, reviewed annually, compliant with Working Together to Safeguard Children (2023) and Kirklees Council's locally agreed safeguarding arrangements. All child protection concerns are escalated immediately to the child's social worker, the LADO where appropriate, Ofsted within required timescales, and West Yorkshire Police where the threshold is met.

All staff hold enhanced DBS clearance obtained before commencing any work with children. A Single Central Record of all safer recruitment checks is maintained and kept current.

18. Safeguarding of Children and Young People

"Safeguarding is paramount" is the defining culture at Frank House. Every member of the staff team holds safeguarding as their primary, non-negotiable professional responsibility.

The Registered Manager and Responsible Individual are the named individuals responsible for leading safeguarding practice. The home operates in close partnership with Kirklees Council Children's Social Care, the Kirklees Safeguarding Children Partnership, West Yorkshire Police, and the NHS West Yorkshire ICB's looked-after children safeguarding teams.

Key safeguarding principles:

- All three children's views, wishes, feelings, and choices are listened to, respected, and given real weight in all decisions.
- A clear, effective, and actively promoted complaints procedure accessible to every child.
- Rigorous safer recruitment — enhanced DBS, full employment history verification, two professional references.
- A clear, comprehensive whistleblowing procedure enabling all staff to raise concerns safely.
- Regular, high-quality safeguarding training at induction and annually.
- Partnership with West Yorkshire Police, Kirklees Children's Social Care, and the Kirklees Safeguarding Children Partnership.

19. Missing Children

Frank House has a comprehensive Missing Children's Policy. Prior to each child's admission, a missing from care risk assessment is completed incorporating their individual history, known triggers, and the specific safeguarding context of Dewsbury and West Yorkshire — including county lines, CSE, and CCE intelligence specific to the Kirklees and West Yorkshire area.

In a 3-bedded home, a missing episode by one child has a particularly direct impact on the other residents. Staff respond immediately to any missing episode: attempting to locate the child; notifying West Yorkshire Police; notifying the Registered Manager; and notifying the child's social worker — all without delay. The remaining children receive immediate additional therapeutic support and emotional reassurance.

20. Behaviour Management

The aim of our Behaviour Management approach is to ensure positive, prosocial, and safe behaviour is consistently promoted. We begin from the fundamental principle that behaviour is a form of communication — for children with EBD who have experienced trauma, challenging behaviour is almost always a communication of an unmet need or overwhelming feeling.

Our Positive Behaviour Support (PBS) framework, underpinned by PACE, ensures every child's behaviour is understood in context. Each child has an individual PBS plan and personalised de-escalation profile. Physical restraint — Team Teach only — is used exclusively as an absolute last resort, by trained staff, fully recorded, reviewed within 24 hours, debriefed with the child, and reported within required timescales.

Expressly prohibited: corporal punishment; deprivation of food, drink, or sleep; restriction of contact with social workers or advocates; humiliating or demeaning sanctions.

21. Health and Safety

Health and safety policies comply fully with the Health and Safety at Work Act 1974 and the Children's Homes (England) Regulations 2015.

- Weekly: fire alarm testing; emergency light checks; medication storage audit.
- Monthly: full property inspection; first aid kit check; fire extinguisher visual; food hygiene audit.
- Quarterly: fire safety review; risk assessment review.
- Annually: 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. Fire safety measures include: comprehensive fire risk assessment reviewed annually; interlinked smoke and heat detection tested weekly and serviced annually; fire extinguishers serviced annually; clear unobstructed escape routes; monthly evacuation drills with full records; and PEEPs for every child and staff member.

23. Medication Management

This home operates a comprehensive medication management system fully compliant with Regulation 23. All medication is stored securely, administered only by trained and authorised staff, and recorded accurately on individual MARs. Controlled drugs are held in an enhanced-security safe with dual-signature recording.

24. Location Risk Assessment

In compliance with Regulation 46, Frank House maintains a comprehensive Location Risk Assessment for 38 Frank Lane, Dewsbury, WF12 0JN and the surrounding Dewsbury and Kirklees area. The assessment considers: local crime statistics from West Yorkshire Police; proximity to schools, health services, and community facilities; West Yorkshire and Kirklees-specific safeguarding risks including county lines and CSE/CCE intelligence; and individual risks for each child placed.

25. Regulation 44 Independent Visits

Frank House receives monthly visits from an appointed independent person. Visits include: individual interviews with each child; inspection of premises and records; interviews with staff; and a detailed written report. All recommendations are addressed promptly by the Registered Manager. In the 3-bedded setting, Regulation 44 visits provide a particularly valuable and close external assessment of the quality of life and care for each individual child.

26. Regulation 45 Quality of Care Review

The registered provider conducts a comprehensive Regulation 45 Quality of Care Review at least every six months, examining: the Ofsted Quality Standards; Regulation 44 findings; feedback from children, families, and placing authorities; complaints and incidents; and staff training. A written review 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, including: death or serious illness of a child; a child going missing; serious safeguarding concerns; incidents requiring police involvement; and certain uses of physical restraint.

28. Records and Record Keeping

In full compliance with Regulation 36 and Schedule 4, this home maintains comprehensive, accurate, contemporaneous, and secure records across all aspects of its operation, including: individual case records; behaviour management and restraint records; MARs and the Controlled Drug Register; staff personnel files; complaints log; fire safety log; health and safety records; financial records; and Regulation 44 and 45 reports.

29. Fitness of Premises

Frank House is maintained at all times to a standard appropriate, safe, and welcoming for the residential care of three children. A programme of routine maintenance inspections and planned preventive maintenance ensures the property is always kept in excellent order. The physical environment is reviewed through monthly inspections and Regulation 44 visits.

30. Staffing and Workforce Development

Frank House at all times maintains the appropriate number of suitably qualified and experienced staff and invests continuously in the training, development, and wellbeing of its workforce.

Staffing Model — Normally 3 Staff On-Site (Maximum 4 at Handover)

- 2 Residential Care Workers on duty at all times during waking hours — dedicated, sole focus on the three children in placement.
- Overnight: 1 Residential Care Worker on waking night duty and 1 sleeping in, in the ground floor Staff Room/Sleep-In.
- 1 Home Manager attending on weekdays from approximately 9:00am.
- Shift handover staggered between approximately 8:30am and 9:00am, lasting 15–30 minutes — a maximum of 4 staff briefly on-site.
- 8 Residential Care Workers employed on a staggered rota providing continuous 24/7 cover.
- On-call senior management available at all times outside office hours.

Staff Induction and Development

- Day 1: Organisational values; safeguarding; equality; UK GDPR; emergency procedures; key policies.
- Days 2–3: Induction to the home — children's files, care plans, risk assessments, daily routines.
- Shadow shifts: minimum 2 before working independently.
- 6-month probationary period with formal supervision every 2 weeks.
- Post-probation: formal supervision minimum every 4 weeks; annual appraisal.

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, reviews all Regulation 44 reports, signs off Regulation 45 reviews, and maintains close regular communication with the Registered Manager.

Proposed Registered Manager

The Proposed Registered Manager holds day-to-day operational responsibility. Must hold, or be working towards within the required timescale, a Level 5 Diploma in Leadership and Management for Residential Childcare, with demonstrable experience in residential care management and EBD specialism.

Residential Care Workers

RCWs are recruited for their values — warmth, compassion, reliability, and genuine commitment. All hold or are working towards a Level 3 Diploma in Residential Childcare. All receive specialist training in EBD, PACE, PBS, and Team Teach. In the 3-bedded model, the relationship between each RCW and each child is exceptionally important — staff are selected with particular care for their therapeutic attunement and relational skills.

32. Staff Structure

Role	Designation	Qualifications	Experience
MANAGEMENT AND GOVERNANCE			
Responsible Individual	RI	As required by Regulation 32	Senior governance experience
Registered Manager	Reg. Manager	Level 5 Diploma in Leadership & Management for Residential Childcare	Min. 2 years' management experience; EBD specialism
Deputy Manager	Deputy	Level 3 Diploma minimum	Min. 2 years' frontline residential care experience
RESIDENTIAL CARE WORKERS — Staggered Rota (Normally 3 staff on-site; max 4 briefly during handover ~8:30–9:00am)			
Residential Care Worker 1	RCW	Level 3 Diploma in Residential Childcare (or working towards)	Values-led; childcare experience; commitment to PACE therapeutic practice
Residential Care Worker 2	RCW	Level 3 Diploma in Residential Childcare (or working towards)	Values-led; childcare experience; commitment to PACE therapeutic practice
Residential Care Worker 3	RCW	Level 3 Diploma in Residential Childcare (or working towards)	Values-led; childcare experience; commitment to PACE therapeutic practice
Residential Care Worker 4	RCW	Level 3 Diploma in Residential Childcare (or working towards)	Values-led; childcare experience; commitment to PACE therapeutic practice
Residential Care Worker 5	RCW	Level 3 Diploma in Residential Childcare (or working towards)	Values-led; childcare experience; commitment to PACE therapeutic practice
Residential Care Worker 6	RCW	Level 3 Diploma in Residential Childcare (or working towards)	Values-led; childcare experience; commitment to PACE therapeutic practice
Residential Care Worker 7	RCW	Level 3 Diploma in Residential Childcare (or working towards)	Values-led; childcare experience; commitment to PACE therapeutic practice
Residential Care Worker 8	RCW	Level 3 Diploma in Residential Childcare (or working towards)	Values-led; childcare 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, staffing, children in placement, property, or regulatory framework. It is submitted to Ofsted as required and made available to children, families, placing authorities, and other relevant stakeholders.

The reviewed Statement of Purpose is displayed at the home and held in the home's records. It is provided to Ofsted at each inspection and updated promptly whenever a notifiable change occurs.

Completed by	Date	Signature
Registered Manager	September 2026	

--- End of Document ---

Appendix A — Quality Standards Self-Assessment

This home is committed to full and ongoing compliance with all nine Ofsted Quality Standards as set out in the Guide to the Children's Homes Regulations.

Standard 1 — The Quality and Purpose of Care

The registered person ensures the home has a clear statement of purpose which is followed in practice. The care provided gives children stability, quality of life, and good outcomes. The PACE model underpins all care.

- Written Statement of Purpose reviewed annually and actioned immediately upon any change.
- Individual Care Plans reviewed at every LAC review and keyworker session.
- Children's wishes, feelings, and choices are recorded and acted upon at every stage.

Standard 2 — Children's Views, Wishes, and Feelings

Children are listened to and their views are taken into account in decisions about their care and about the running of the home. In a 3-bedded home, all three children's voices carry particular weight — with only three children, there is no risk of an individual voice being lost.

- Regular keyworker sessions providing a safe, private, and consistent space for each child to share their views.
- Monthly Regulation 44 visits providing an independent and unmediated opportunity to share views.
- Residents' meetings, suggestion boxes, and quality assurance questionnaires.

Standard 3 — The Safeguarding of Children

Children are protected from abuse and neglect. All safeguarding concerns are responded to immediately. The home works in close partnership with West Yorkshire Police, Kirklees Safeguarding Children Partnership, and all relevant statutory bodies.

- All staff trained in safeguarding at induction and annually.
- Enhanced DBS clearance for all staff before commencing work.
- Location Risk Assessment updated annually and after any significant local safeguarding development.

Standard 4 — The Health and Well-being of Children

Children's physical and mental health and emotional well-being are promoted and protected. All three children are registered with local health services on admission and receive timely health assessments.

- Statutory health assessments completed within required timescales.
- CAMHS referrals pursued urgently where clinically indicated.
- Healthy, culturally appropriate, and nutritious meals provided daily.

Standard 5 — Education

Children's educational needs are met. The home works closely with Kirklees Council's Virtual School Head to ensure all three children have access to appropriate educational provision.

- PEP reviews attended and actively contributed to by the Registered Manager.
- Homework support embedded into daily evening routines.
- Every educational achievement celebrated by the whole staff team.

Standard 6 — Enjoyment and Achievement

Children's cultural, recreational, sporting, and leisure needs are met and their talents and interests are nurtured. In the 3-bedded model, activities are tailored completely individually to each child's preferences.

- Full programme of activities across Dewsbury and West Yorkshire tailored to each child's interests.
- Cultural and faith celebrations reflecting each child's background.
- Support for developing hobbies, skills, and positive interests.

Standard 7 — Positive Relationships

Children are supported to develop and maintain positive relationships within and beyond the home. Family contact is actively facilitated in accordance with care plans.

Standard 8 — Protection of Children

Children are protected from exploitation and harm. Location Risk Assessment addresses West Yorkshire-specific county lines, CSE, and CCE risks. All three children have individual safeguarding risk assessments reviewed regularly.

Standard 9 — Leadership and Management

Effective leadership and management drives the quality and consistency of the care provided. The Registered Manager and Responsible Individual maintain active oversight through Regulation 44 visits, Regulation 45 reviews, and monthly internal audits.

Appendix B — Regulatory Framework Summary

This home operates in full compliance with the following legislative and regulatory framework:

- The Children's Homes (England) Regulations 2015 — all Regulations and Schedules.
- The Guide to the Children's Homes Regulations including the Quality Standards (Ofsted, current edition).
- The Children Act 1989 and Children Act 2004.
- The Children and Young Persons Act 2008.
- Working Together to Safeguard Children (2023).
- The Care Standards Act 2000.
- UK General Data Protection Regulation and the Data Protection Act 2018.
- The Human Rights Act 1998 and the Equality Act 2010.
- The Health and Safety at Work Act 1974.
- The Regulatory Reform (Fire Safety) Order 2005.

This framework is reviewed annually for legislative and regulatory changes. All significant changes are implemented promptly, communicated clearly to the staff team, and reflected in updated policies and procedures.

Appendix C — Key Contact Directory

The following key contact directory is maintained and reviewed annually:

Ofsted	0300 123 1231 enquiries@ofsted.gov.uk
Kirklees Council Children's Services	01484 221000
Kirklees Safeguarding Children Partnership	Via Kirklees Council Children's Services
West Yorkshire Police (non-emergency)	101
West Yorkshire Police (emergency)	999
Dewsbury and District Hospital (Mid Yorkshire Teaching NHS Trust)	Via NHS 111 or 999 for emergencies
NHS West Yorkshire Integrated Care Board	Via NHS 111
Childline	0800 1111 (free, 24 hours)
Children's Commissioner for England	020 7783 8330
LADO (Kirklees Council)	Via Kirklees Children's Services