



Nicholas House, St Albans





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Nicholas House

We want Nicholas House to be a safe and happy place to live. Everyone will have their own home in the community, with choice and control, friendships and meaningful activities.

Our design philosophy

We design and build high quality, bespoke homes, working with each customer, their families, carers and health and social care professionals. We don't replicate institutional or clinical environments; we create joyful and lively places where people want to live. Each apartment will be fit for purpose and robust, with an emphasis on a safe environment for young people and their support teams.

Design features could include:

- sound insulation
- toughened glazing
- recessed light fittings and switch plates
- floor finish to include non-slip vinyl floor with rolled up edges
- under floor heating or thermoskirt systems
- high impact-resistant fittings such as doors, sanitary fittings
- double action internal opening doors.



Some rooms may have specific features to ensure the environment is safe. For example, kitchens could have:

- matt finish/low reflective surfaces
- touch safe integrated hob
- integrated appliances
- soft close doors/drawers
- concealed or boxed in pipework.

Nicholas House is in St Albans. It's close to local amenities; a doctor's surgery, pharmacy, a Spar shop and a YMCA fitness centre are all within walking distance. There are good transport links, with bus stops in nearby Hill End Road and a train station at St Albans City. There is a large rear garden, with access to green spaces.

There will be a multi-purpose space on the ground floor for social, therapeutic, group activities or other uses, plus two private rooms for one-to-one discussions, family meetings or support. Staff have access to dedicated office space, where they can take timeout if needed; additional unobtrusive support will be available if needed. There is easy access to the large rear garden, this will offer a soothing and calm environment for all residents. Most all of the apartments have views of the garden; the ground floor flats have large bay windows. Each has a bedroom, bathroom (wet room), kitchen and living room.

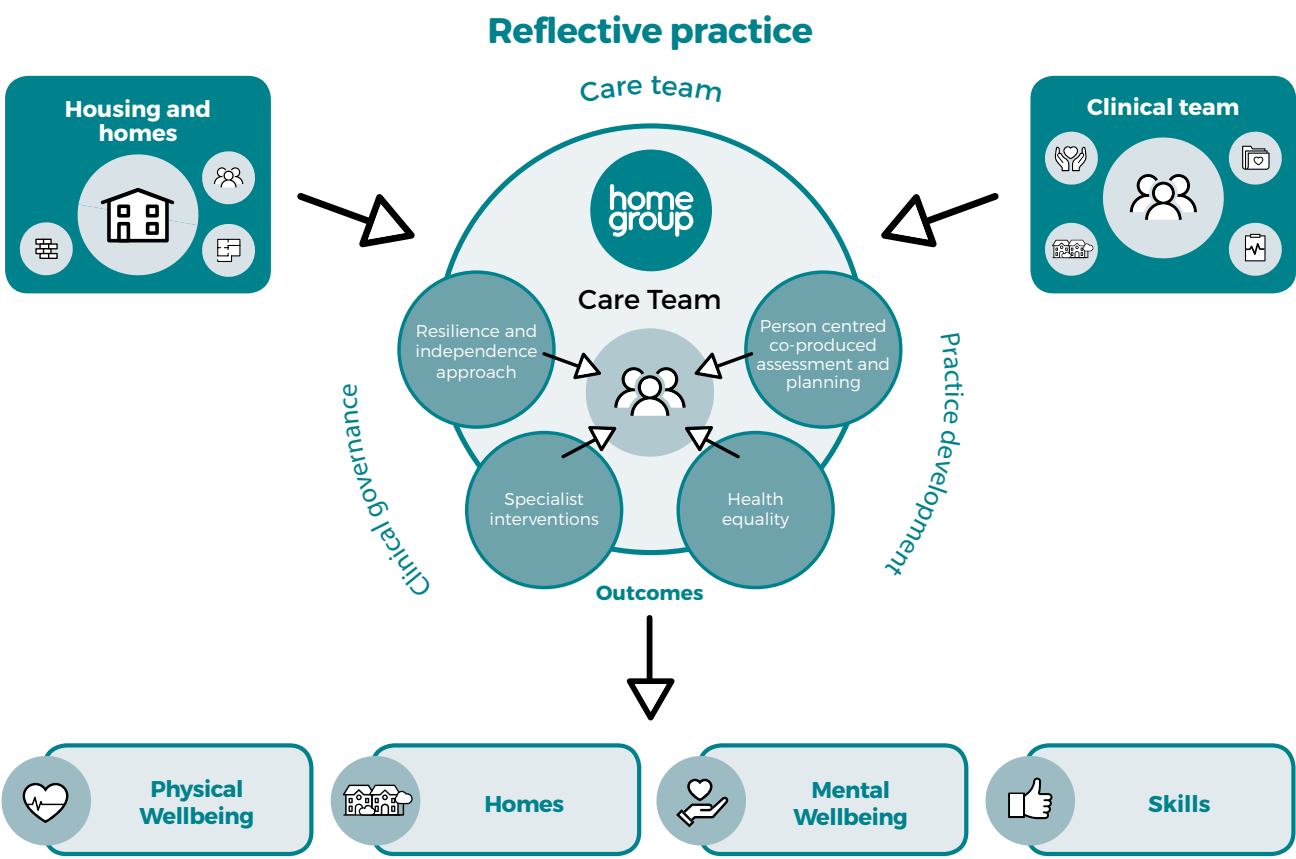
We will apply psychologically informed environments (PIE) principles, creating welcoming and reablement focused spaces, considering noise, light, comfort and colour in a mixture of private and communal areas. The way we communicate information - e.g. the number and placement of signs will avoid overwhelming people. Key work spaces will be private, well kept, light and inviting. Each young person and their family will have choice and control about the décor, lighting and use of colour in their homes, and how communal space can be used.

The garden will be an inviting place incorporating social spaces, areas for physical activity, also areas for quiet reflection. Design features will include robust materials, low arousal areas, and a logical layout with clear paths and vistas. Residents will be encouraged to shape the outdoor area to meet their wishes; for example they may want to grow fruit and vegetables. We have used this approach at other services to increase people's wellbeing and boost quality of life.



Our LIFE support practice model

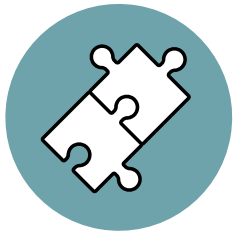
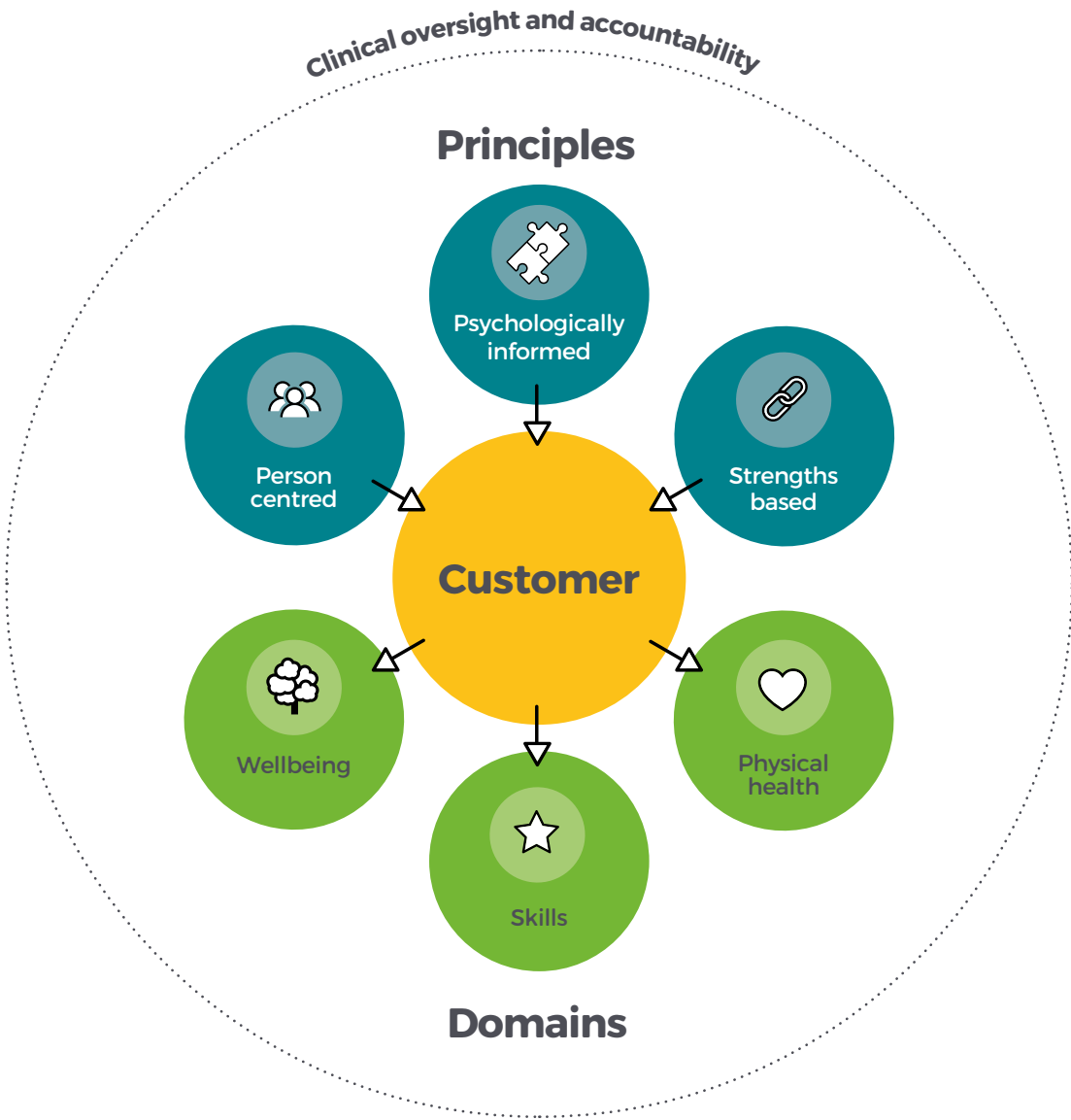
LIFE Model (Living Independently and Feeling Enabled)



We want everyone at Nicholas House to have the same opportunities as anyone else to live satisfying and valued lives. The LIFE model is based on three principles:

- Psychologically informed
- Person centred
- Strengths based.

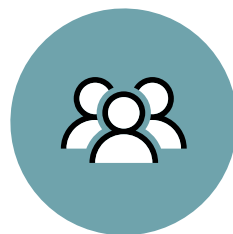
These principles provide the values framework for our practice to reduce behaviours of concern and increase quality of life.



Psychologically Informed

We will prioritise and seek to understand the emotional and mental health needs of each young person; this is the foundation of good support. The relationships we will build with young people are crucial to enabling them to develop and lead their best life.

Some may have experienced trauma through their disability, institutional placements, their sensory needs and communication challenges. We will respond with empathy not judgement and understand behaviours that may challenge us as a form of communication.



Person Centred

Every young person will be at the centre of support with families, advocates and professionals, a key component of person centred planning. Through tailored approaches we enable each person to have a voice, helping us to understand their past and present and empowering them to define their goals and outcomes.

Personalised planning and support will:

- maximise ability to live an ordinary life
- focus on aspirations and what matters to the young person
- deliver progression
- contribute to successful achievement of outcomes.

Each young person's talents, history, motivation and interests will help us to shape their support; we call this 'tailoring'. Working together, we will identify goals and outcomes. Interventions will be matched to these. All achievements, no matter how small, will be celebrated.

Person centred planning tools, selected by young people, will create imaginative and flexible support plans. Choice and control is central; communication passports will include options such as Makaton, to create trusting relationships. All decisions made about care are made in partnership with each young person and their families.



Strengths Based

We look for what is strong and not wrong, helping people to build their skills. Graded support helps people to develop and take positive risks. We call this scaffolding, this can fall away as people grow and develop or be built quickly when needed. Every moment is an opportunity to increase someone's skills or confidence.

Active support will be central delivering:

- increased independence
- aspiration, choice and control
- an asset focussed approach
- connection with the local community

The model has three domains:



Wellbeing: Important to me and for me

We want everyone to enjoy meaningful activities, chosen by them, that make them happy and contented. We focus on what is important to each person and what they value. Improving quality of life is the best way for us to reduce the risk, severity and frequency of behaviours of concern.

As well as supporting people to be in the community or to do activities, we will help them build relationships. Rather than simply heading for community facilities, we will use our knowledge of St Albans and what it can offer. Colleagues will spend time with young people, getting to know them, the places and activities they enjoy.

Structure and routine are important, helping to reduce anxiety; support plans will include employment, training, education as well as activities that are based around individual interests. This does not mean people are not exposed to a wide range of experiences, but that this is done in a planned and sensitive way. Supportive rehearsal reduces levels of anxiety, helps each person to learn to accept new experiences and develop new skills. Delivered by staff, under the guidance of their clinical colleagues, there will be orientation into the local community. Technology will help, with pictures, photos and videos of locations and facilities, progressing to short trips. A gradual increase in social interaction, going to places that each person enjoys and meeting people with similar interests will support this.



Wellbeing: Important to me and for me

Having a normal life includes making choices about intimate relationships and the bonds with friends and families. Supporting families to interact positively with their loved ones, providing opportunities for new friendships to develop and understanding the sexual needs of young people is crucial. Tools such as 'Relationship Circle', help us understand who is important to them and how to build on these networks.

Positive Behavioural Support

We use the Positive Behavioural Support (PBS) framework to reduce the likelihood of behaviours that challenge. New Behaviour Support Plans, prepared as part of the transition, will include input from young people, professionals and families. We will gather relevant data around individuals' behaviour, with observation and discussion with current staff teams, to support a functional assessment. Baseline measures of quality of life and restrictive practice will be assessed. Plans will be reviewed regularly, initially fortnightly, moving to monthly. New assessments will follow any changes in needs/risk or presentation or behaviour change. This will identify trends and patterns that can support further insights. Behaviours that challenge and restrictive interventions are recorded and monitored using the Ulysses risk/incident management system, helping us to learn and deliver better support.

Everyone will be encouraged to think about positive risk taking in their lives, considering what may go wrong, making informed choices and how to manage risk. We want people to learn from their mistakes, including the right to make unwise decisions as long as they are not harmful to themselves or others. The management of risk will be person-centred and proportionate to individual circumstances. Capacity can change over time, so everyone will have an individualised approach.

Risk assessment

Risk assessment is a dynamic process, taking into account each person's history, behaviours that challenge and protective factors. We will assess how each individual is feeling, thinking and perceiving others, not just how they are behaving, with direct observation and monitoring. A modified version of FACE risk profiles, is part of a wider assessment using 5P formulation. This comprehensive risk formulation will be prepared with multi-disciplinary support. It will help us to understand the nature of risk and management plans, to reduce the likelihood of occurrence, respond to crisis and take positive steps to enable progress.

We are committed to the 'Restraint Reduction Network' strategy; we always use the least restrictive option to maintain safety. The use of restrictive interventions is monitored; we reflect on each incident and use this to drive improved understanding, greater safety and more effective support.



Progression will be monitored at an individual and service level, assessing:

- reductions in behaviours of concern
- increases in functional communication
- acquisition of new skills
- participation in activity
- decrease in the use of restrictive practices.

Happiness is a key indicator; we'll measure positive impact using our LIFE tools, quality of life (Guernsey Community Participation and Leisure assessment), and mental wellbeing. We have worked with our customer insight team and a specialist company (Revealing Reality) to create a tool to capture each young person's experience. Using observation and interviews with young people and their families, will give us feedback that will show to what extent we are enabling them to have good quality of life, connected with friends and spending time doing the things that matter to them.

We are committed to the Driving Up Quality initiative, Restraint Reduction Network, 'STOMP' campaign, Health Charter and 'REACH' principles. These are embedded into our practice, with a systematic approach to recording, monitoring and reporting progress against the standards.



Skills

The skills domain focuses on enabling young people to reach their potential, build skills for independence and find out what they like to do. We use the 'Model of Human Occupation' to analyse core skills and build on these to maximise participation in activities of daily living. This will provide us with a baseline of ability, helping us agree support and interventions that will help improve quality of life and increase independence. Co-produced skills development plans will detail activities of daily living (personal, domestic and leisure) and support for each young person to build their skills in each area, tailored to their interests.

Communication passports are used to maintain a consistent and tailored approach to enabling communication. Objects of reference, symbols and photographs are all used to enhance communication and enable shared understanding. Communication plans will support young people to extend their range of communication, enabling greater choice and control.



Home Achievement Programme (HAP)

The HAP is our One Awards accredited learning and development programme, promoting opportunities to boost skills, confidence and employability while increasing resilience and promoting independence. The programme offers a wide range of modules and activities to embed new skills and promote personal development. HAP promotes mental and physical health and supports people to sustain their own tenancy.

Modules are grouped under four themes:

- Health and wellbeing
- Promoting independence
- Social responsibility
- Employability



Physical Health

People with learning disabilities frequently experience poorer health and health outcomes. Physical health is the bedrock of wellbeing, helping people to live longer, healthier lives. The Health Equality Framework and the Health Charter for Social Care will be used to assess the quality of our approach.

We will:

- provide accessible information on health
- provide support for people when attending health care meetings
- promote access to health screening
- enable access to an annual health check
- co-produce hospital passports and health action plans.

In practice this can include support when young people attend appointments, such as:

- liaising with health professionals and services to agree reasonable adjustments
- taking symptom diaries
- practicing the questions each person wants to ask
- checking understanding during the meeting and summarising at the end
- extended appointments
- appointments at Nicholas House during transition

STOMP is integrated into the LIFE model. In line with 'Making Every Contact Count' and the Health Charter. PBS workers will monitor BMI and other basic health information where appropriate. They are trained in health coaching.



Our team

The service will be overseen by a nurse manager, with the support of a deputy, a Positive Behavioural Support (PBS) specialist, PBS team leaders, and teams of PBS workers.

All the young people at Nicholas House will need staff who know them well. If the team around each person keeps changing, they are always having to 'start again'. A team of PBS workers will support each individual, led by a PBS team leader. Staff will be introduced gradually, spending time with them and their families, at different times and locations. Over a period of time, in reach support will help us build trusting relationships.

We will do our best to enable people to be matched with the workers of their choice, maintaining this link wherever possible. Needs and risk can change; periods of behaviours of concern may require a staff member to transfer to alternative duties on a temporary/permanent basis, to avoid burnout. Any changes will be planned and discussed with each young person, families and stakeholders, taking into account the difficulties they may have with trust and building up new relationships.

PBS workers will have a Level 2 Diploma in Care or equivalent experience. PBS team leaders will have a Level 3 Diploma in Adult Health & Social Care, or equivalent and managerial experience working in health or social care.

The PBS Specialist will hold a recognised post-graduate qualification in positive behavioural support or applied behaviour analysis.

Working as part of a multi-disciplinary team the lead will:

- develop functional behaviour assessments during transition and once each young person has moved in
- implement and evaluate PBS plans
- providing practice leadership, supervision and coaching to the team
- support the development of skills and specific strategies for each young person
- have oversight of the use of restrictive practices and support their reduction as part of individual restraint reduction plans.



Continuity of Care and Crisis Planning

Individual contingency plans for planned and unplanned staff absence, with access to additional colleagues to support escalation in challenging behaviour, will be agreed. There will be a mix of full and part time contracts, with additional flexi hours that can be used at short notice. Shifts will be used flexibly, ranging from 1-8 hours. Managers will monitor rotas, staff hours, sickness, turnover, annual leave entitlement, training and workload. Staff will be encouraged to tell us when they are struggling, and can step back on a temporary/permanent basis if required. As well as formal supervision every four weeks, managers make time for 'Brilliant Conversations', good quality discussions with colleagues, to see how things are going.

Reflective Practice

Reflective Practice will help staff to take time to think about their roles and build emotional resilience. Led by regional clinical colleagues, this will offer opportunities to discuss what is going well, what is difficult, how they are feeling, and the relationships they have with young people. Colleagues will be more able to cope with behaviour that can lead to low morale and burn-out, reducing absence. Further support is provided through weekly case discussion meetings, debrief and handover sessions and peer support. Turnover will be addressed, with changes to staffing models, shift patterns and enhanced training.

Learning and development

The PBS learning pathway for each colleague includes:

Introduction to LIFE – giving an overview of the three principles (Psychologically Informed; Person-Centred and Strength Based) and how and why we structure our support into the three domains (Wellbeing; Skills; Physical Health). There is an initial e-learning module (based around the care certificate). This is followed by a face-to-face workshop covering working in a person-centred way using five tools: Relationship Circle; The Poster; Important To/Important For; Good Day/Bad Day and Shoe Box.

LIFE Conversations – how to work with young people, building positive relationships. The role of good conversation to implement and ensure consistent person-centred approach.

Wellbeing Important for me: Introduction to Clinical Risk, which covers:

- what a clinical risk is
- understanding context, risk factors and dynamic nature of risk
- our process for managing clinical risk in Home Group
- the roles and responsibilities for key members of the team.

Wellbeing: Important To Me – this introduces our LIFE planning tools, enabling customers to lead the process and maximise their choice and control.

Wellbeing: Important For Me: Risk and Needs Screening;

- teaching team leaders how to use our initial screening tool to identify and prioritise individual risks and needs
- how to include the young person, other professionals and their family.

Wellbeing: Important For Me: Risk assessment, formulation and management.

Prevention and Management of Violence and Aggression, with:

- one day face-to-face understanding behaviour and an introduction to PBS
- one day face-to-face de-escalation, distraction and diffusion
- one day physical intervention (delivered to teams who are working with young people who need physical restraint to remain safe)

PBS team leaders and clinicians are taught to:

- gather information pertinent to risk
- use this information to formulate risk using the 5P methodology
- develop risk management plans, contingency plans, crisis plans and positive risk plans.

This course is currently delivered by Sherwood Training Ltd and is compliant with the Restraint Reduction Network Training Standards (2019). Specific additional training will be delivered through tailored workshops to deliver competencies that the team will need in order to work with each young person. Competence assessment and regular supervision will be an integral part of the development of these skills in practice.

Frontline staff training also includes Home Group’s core and specialist training packages.

STOMP	LIFE model	Introduction to clinical risk	Basic autism awareness
Equality, diversity and inclusion	Working in a person centred way	Person centred planning	Record keeping
Intermediate knowledge for working with autism	Safe handling of medication	Care Programme Approach	Mental Capacity Act/ DoLS
Mental Health First Aid	GDPR	Safeguarding adults	Health Action Plans/ Hospital Passports
Care Certificate assessor	Personal safety	Understanding stress	Community Treatment Order
Assistive technology	Resilience	Management/ Minimisation of Risk	Fluids and nutrition

Transition planning

Moving into a service that is person centred and encourages growth of independence can be a very unsettling time. We'll start by thinking about each person's strengths, what they are good at, the things they care about and their aspirations. We want each individual to create a picture of the life they would like to have at Nicholas House. It will be clear, easily understood and specific to them. A variety of formats will be available, such as graphics, pictures, video or audio clips.

This can include:

- their life story
- personal characteristics
- relationships
- what a new home means to them

It will take time and commitment to develop this picture; everyone will work at their own pace.

Planning – transition planning for each person will be led by our nurse manager, with the support of PBS team leaders. A nominated point of contact will engage with each young person, their family and multi-disciplinary team (MDT).

The process will include:

- in-reach visits
- shadowing existing staff in their current location
- a new Positive Behavioural Support assessment

A PBS plan will detail behaviours in particular scenarios and proactive approaches to support the process. This might include changes to the environment, nuanced support strategies or agreed protocols. A skills development plan will identify the skills the person might need for a successful transition and support each young person to develop these during in-reach. This might include travel training, using stairs, or any other skills needed in the new environment etc.

A comprehensive risk formulation will detail the nature and degree of the risks. Scenario planning will help anticipate potential triggers and our response, allowing us to prepare mitigation and prevention strategies. The role each professional plays in supporting each young person will be identified. We will map functions and responsibilities to Nicholas House and ensure a multidisciplinary team is in place.

Involvement – we will learn from everyone's experience, especially those that know each young person best. We are mindful of the impact the health and care system has had on each individual's life, and the role we are playing in their future. It may be difficult for them to think about what might be possible. Every aspect of each person's move will be explored, so that decisions and choices about everything from outcomes to décor can be discussed. The value and contribution of families and carers will be recognised, with visits to Nicholas House during the development, meeting the staff team. We'll broker peer support and specific training, and take into account their willingness and ability to provide support.

Communication – a co-produced communication passport, information sharing protocols and joint working agreements, means that every individual is at the centre of decision making. At each stage every young person and their families will have access to as much information as possible about the move to Nicholas House. For example, we will use easy read formats or bring pictures and videos of the scheme as it develops, reducing anxieties and increasing trust.



Flexibility – change will be introduced gradually, with visits to Nicholas House; short stays may be appropriate. Each individual will be encouraged to spend more time engaging in the community, with staff observing them, helping us to understand their needs. The transition process will be phased. We'll monitor individual progression during in reach, as well as taking a broader view of risks associated with eight people moving into their new homes. Each person will take time to settle and this will impact on the time needed to transition everyone. We'll also consider the order for people to move and which home they will live in; this may change as we progress. Their new homes will be ready, with features and décor they have chosen and familiar things around them.

Get in touch

Doug Dawson
Lead Business Development Manager
doug.dawson@homegroup.org.uk
Tel: 0845 155 1234 / 07468 477769

Home Group
2 Gosforth Park Way, Gosforth Business Park
Newcastle Upon Tyne
NE12 8ET

Email: newmodelsofcare@homegroup.org.uk



www.homegroup.org.uk/newmodelsofcare