



STATEMENT OF PURPOSE

BLOSSOM HOUSE

A solo residential children's home in Northampton for children aged 8–17 with emotional and behavioural difficulties and/or learning disabilities

Ashlotrimcare Ltd • July 2026 • Version 1.0

Prepared in accordance with Regulation 16 and Schedule 1 of the Children's Homes (England) Regulations 2015

Introduction

This Statement of Purpose sets out the aims and objectives of Blossom House and the facilities and services we provide, as required by Regulation 16 and Schedule 1 of the Children's Homes (England) Regulations 2015. It should be read alongside the Guide to the Children's Homes Regulations including the Quality Standards (2015). A copy is available to staff, children, parents and placing authorities, and is published as required. It is reviewed at least annually and whenever the service changes.

Blossom House is operated by Ashlotrimcare Ltd, an established care provider registered with the Care Quality Commission for personal care and experienced in delivering regulated care across Bedfordshire, Hertfordshire and Milton Keynes. Blossom House is one of two solo-placement children's homes operated by the company, alongside Probay House in Milton Keynes.

1. Quality and Purpose of Care

1.1 The children we care for

Blossom House provides care and accommodation for one child or young person, male or female, aged 8–17 years, with emotional and behavioural difficulties (EBD) and/or learning disabilities (LD). Every placement is a solo placement supported at 2:1 during waking hours. The home is suited to children who need the undivided attention of a consistent staff team — including children stepping down from secure, Tier 4 CAMHS or residential school settings, children with experiences of exploitation or repeated placement breakdown, and children whose risk profile or sensory and communication needs make shared living unsuitable.

1.2 Ethos, outcomes and care approach

Our ethos is that every child deserves a warm, safe, family-style home where they are valued, heard and supported to thrive. Care is trauma-informed and therapeutic: for children with EBD we use the PACE model (Playfulness, Acceptance, Curiosity, Empathy) and individual positive behaviour support plans; for children with a learning disability we provide structured, predictable routines, accessible communication (visual timetables, Makaton or PECS where assessed) and sensory-aware care. The home seeks to achieve:

- A sense of safety, stability and belonging;
- Positive relationships with trusted adults and peers;
- Improved engagement in education and learning;
- Improved emotional regulation and, where relevant, communication and independence skills;
- Opportunities to reflect on experiences and form healthy attachments;
- Practical skills for independence and a well-planned transition to the next stage of life.

1.3 Activities and personal development

Each child has a weekly activity plan built around their interests, abilities and care plan, which may include swimming and sports, arts and crafts, sensory-based activities, cooking, trips to the cinema, parks and museums, youth clubs, and celebration of birthdays, festivals and achievements. Activities are chosen to be accessible and adapted for the child's needs.

1.4 Cultural, linguistic and religious needs

We support each child's identity through culturally appropriate food, support to attend a place of worship, celebration of religious and cultural festivals, resources in the child's first language, and interpreters or culturally matched staff where applicable.

1.5 Contact with family and friends

We actively promote contact where it is safe and consistent with the child's care plan and any court orders: supervised or unsupervised contact, transport to contact venues, contact within the home where appropriate, and emotional support before and after sessions. Contact arrangements are agreed with the child's social worker.

1.6 Consultation with children

Because the home is a solo placement, the child's voice shapes daily life directly. The child is consulted through daily keywork conversations, weekly planning of menus and activities, monthly structured consultation (adapted to communication needs, using visual or easy-read formats where required), and their views are recorded and acted upon. Children contribute to their care plans and reviews and are supported to access independent advocacy.

1.7 Equality and children's rights

We comply with the Equality Act 2010 and promote the rights set out in the United Nations Convention on the Rights of the Child. Each child receives an age-appropriate Children's Guide (including an easy-read version where needed) explaining their rights, how to complain, and how to contact their social worker, an advocate, Ofsted or Childline.

1.8 Accommodation and location

Blossom House is a spacious residential house in Northampton, chosen following a location risk assessment for its proximity to schools, health services, parks and community amenities. Address: 14 St Pauls, Northampton, NN2 6ES. The home provides a large kitchen and dining area, comfortable living room, the child's personal bedroom (decorated to their taste), an activity/sensory room, bathroom facilities, a staff sleep-in room and office, a garden, and parking. As a solo home, the whole house is arranged around one child.

1.9 Safeguarding, bullying and missing from care

Safeguarding is our highest priority. We work within the West Northamptonshire Council (Northamptonshire Children's Trust) safeguarding partnership procedures, and our safeguarding, anti-bullying, e-safety and missing-from-care policies are available on request. Staff receive training in safeguarding, child sexual and criminal exploitation, county lines, online safety, radicalisation and lone working. As a solo home there is no peer-on-peer bullying risk within the home; vigilance focuses on school, community and online contexts. If a child is missing, staff follow the home's Missing from Care policy, the placing authority's protocol and police procedures, and an independent return home interview is offered.

1.10 Admission criteria and procedure

Admissions are planned wherever possible. Before any admission the Registered Manager completes a referral assessment and impact assessment covering the child's needs, risks, education, health and contact arrangements, and whether the staff team can meet the child's needs at 2:1. We accept emergency admissions only where a satisfactory risk assessment can be completed and the placement is in the child's best interests. Because the home is solo, matching considerations focus on the fit between the child, the staff team and the local community.

1.11 Moving on from the home

Transitions — home to family, to foster care, to another provision or to semi-independence — are planned with the child, their social worker and their IRO. For older children, preparation for adulthood includes independent living skills, and we support pathway planning from age 16 in line with leaving care legislation.

1.12 Complaints

Children, families and professionals can complain without fear of reprisal. Complaints are acknowledged within 24 hours, investigated by the Registered Manager (or the Responsible Individual if the complaint concerns the manager), and responded to within 28 days. Unresolved complaints may be escalated to the placing authority or to Ofsted. The Children's Guide explains complaints in child-friendly language.

1.13 Access to policies

Our full suite of policies — including safeguarding, behaviour management, physical intervention, missing from care, complaints, whistleblowing, data protection, health and safety, fire safety and medication — is available at the home to staff, children, parents, placing authorities and Ofsted on request.

2. Behaviour

2.1 Positive behaviour support and physical intervention

Behaviour that challenges is understood as communication. Each child has an individual positive behaviour support plan identifying triggers, early warning signs, de-escalation strategies and agreed responses. Staff are trained in an accredited de-escalation and physical intervention model. Physical restraint is used only as a last resort, where necessary to prevent injury to the child or others or serious damage to property, using the minimum force for the shortest time, never as punishment. Every intervention is recorded, reported to the placing authority, reviewed by the Registered Manager, and debriefed with the child and staff.

2.2 Restorative approach

We use restorative conversations rather than punitive sanctions wherever possible, helping the child understand impact, repair relationships and learn. Consequences, where used, are reasonable, proportionate, relevant and recorded.

3. Education

Education is central to each child's plan. We work with the child's school or education provision, the Virtual School for the placing authority, and the SEND team where the child has an EHCP — which many of the children we care for will have. Staff support school attendance daily, attend PEP reviews, provide a quiet study space and homework support, and arrange tuition where a school place is not yet available so there is no gap in learning. For children with learning disabilities we advocate for appropriate specialist provision and reinforce learning through daily living activities in the home.

4. Health and Wellbeing

Each child is registered with a local GP, dentist and optician within one week of admission, and attends routine and specialist appointments supported by staff. We work with CAMHS (Northamptonshire), learning disability health services and therapists commissioned in the child's

care plan. Medication is managed under our Medication Policy: stored securely, administered by trained staff, and recorded. Healthy eating, exercise, sleep routines and emotional wellbeing are promoted daily, and health outcomes are tracked through the child's health assessment and plan.

5. The Staff Team

The staffing model reflects the solo 2:1 commissioning basis of every placement: two members of staff dedicated to the child throughout waking hours, with sleep-in or waking-night cover as required by the child's care plan.

- **Registered Manager:** Nomzamo Sibanda — holds the Level 5 Diploma in Leadership and Management for Residential Childcare and is trained in Regulation 44 independent visiting, with experience in residential childcare.
- **Deputy Manager:** leads shifts and deputises for the Registered Manager (Level 3 minimum, working towards Level 5).
- **Residential Support Workers:** a team of at least 8 full-time equivalents, each holding or working towards the Level 3 Diploma for Residential Childcare within two years of appointment.
- **Bank staff:** a vetted pool used to maintain the 2:1 ratio during absences; agency use is minimised and inducted.

All staff complete a structured induction and mandatory training (safeguarding, first aid, fire safety, food hygiene, medication, de-escalation and physical intervention) plus specialist training in attachment and trauma, PACE, positive behaviour support, autism and learning disability awareness, and communication tools. Staff receive monthly supervision, an annual appraisal and regular team meetings. Recruitment follows our Safer Recruitment policy with enhanced DBS checks, full employment history and references.

6. Leadership, Management and Governance

Registered Provider:	Ashlotrimcare Ltd (company no. 11385091), Regus House, Fairbourne Drive, Atterbury, Milton Keynes, MK10 9RG
Responsible Individual:	Chike Chukwudi
Registered Manager:	Nomzamo Sibanda
Home:	Blossom House, 14 St Pauls, Northampton, NN2 6ES
Telephone:	01908 061979
Email:	Childrenplacement@ashlotrimcareltd.co.uk
Placing authority area:	West Northamptonshire Council (Northamptonshire Children's Trust)

The Responsible Individual oversees the home on behalf of the provider, supervises the Registered Manager and ensures compliance with the Children's Homes (England) Regulations 2015. Governance includes monthly Regulation 44 visits by an independent person (reports shared with Ofsted), six-monthly Regulation 45 quality of care reviews, notifications to Ofsted of significant events under Regulation 40, and continuous monitoring of records, sanctions, restraints, complaints and outcomes.

6.1 Organisational structure

Responsible Individual (Chike Chukwudi) → Registered Manager (Nomzamo Sibanda) → Deputy Manager → Senior Residential Support Workers → Residential Support Workers and bank staff. A second Registered Manager will be recruited (or dual registration sought) as the second home opens, subject to Ofsted's assessment.

6.2 Ofsted

The home is regulated and inspected by Ofsted. Contact: Ofsted, Piccadilly Gate, Store Street, Manchester M1 2WD; telephone 0300 123 1231; enquiries@ofsted.gov.uk. Children are told how to contact Ofsted and Childline (0800 1111) in the Children's Guide.