



# Peer-Review Report

## **The Oaks**

### Amberleigh Care

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## Introduction

The Oaks has been a member of Community of Communities for 6 years.

The visiting peer-review team spent a day with the community sharing experiences and practice. Information detailed in this report was collected through various means, including interviews with community members, observations of the community and a review of evidence provided.

### Visiting peer-review team:

Name	Service	Job Title	Role on the day
Niamh Roberts	RCPsych	Project Officer	Lead Reviewer
Carl Wilkin	HMP Grendon	Band 4 Specialist Officer	Peer Reviewer
Susan Hearn	The Hollies	Senior Residential Support Worker	Peer Reviewer
Rebecca Linden	The Hollies	Home Manager	Peer Reviewer

### About this report

This report summarises the findings of a self- and peer-review based on the Service Standards for Therapeutic Communities, 10<sup>th</sup> Edition (see [www.rcpsych.ac.uk/cofc](http://www.rcpsych.ac.uk/cofc)). These Service Standards include the 10 Core Standards which are informed by the Core Values (see Appendix 2). The Core Values provide a context for the Core Standards, and together they identify common core beliefs, values and structures that are held by Therapeutic Communities.

Members of Community of Communities (CofC) self-review their community and take part in peer-review visits of others. In doing so, the CofC standards are used to reflect and share ideas, discuss community structures and practices, identify achievements and strengths, and to identify areas for improvement or development. This process of engagement and reflection helps members bring about change and improvements to their service (for more information see Appendices 1 & 3).

This report summarises the review findings and highlights areas of achievement and areas for development. A summary of the action plan from the previous review, updated with relevant outcomes, has been included when this has been submitted at self-review. The report includes a summary of the overall experience of the review day, a numerical summary of scores achieved and a detailed review of the standards covered during the visit.

### The process of generating local reports

After the review visit the Project Team collate all the comments from the self and peer-reviews to compile the local report. All comments are treated confidentially, and the names of staff and Service Users are not included in the written report. The draft report is sent to the host community and peer-review team for comment. The final report is sent to the host community only. The report is the property of the host community, to share as they wish. The scores from the self and peer-reviews will be combined across the network to produce a National Report. Importantly, all data will be anonymised, and the community will not be identifiable within this report. The National Report also includes some comments of good practice, pulled from the comments provided in the

local reports by both self and peer-reviews stages. Similarly, the community will not be identifiable through the use of these comments and references to the community name are not included in the National Report.

### **Who should see this report?**

Completed peer-review workbooks are sent to the Community of Communities Project Team who compile and format the report and send to the Lead Contact at the community. Communities are encouraged to share their report with all members and with any parties with significant interest in the community.

### **Statement of Limitation**

The main value of being a member of the Community of Communities is taking part in the network. This document summarises the views about your community provided by client and staff members and the peer-review team in relation to the Service Standards for Therapeutic Communities (10<sup>th</sup> edition). It is not a definitive statement of performance in any of the areas covered by the Community of Communities standards.

If you have any queries about any aspect of this report, please contact a member of the CofC Team.

Email : [cofc@rcpsych.ac.uk](mailto:cofc@rcpsych.ac.uk)

Address : *The Royal College of Psychiatrists, 21 Prescot Street, London E1 8BB*

## Community Background

### Our Story

The Oaks Community was opened in 2015. The community provides care, education and therapy. Our community works specifically with young males (11-18) who display harmful sexual behaviour. Given the specialist nature of the presenting needs of our boys, we draw on evidence base and theory of risk management and intervention for sexually harmful behaviour. The conceptual framework for responding to these needs is the Good Lives Model, which is a strengths based, resilience building model. Within this framework we employ a range of therapeutic modalities, psychotherapy, dance and movement. This is delivered by an in-house therapist. In 2021 we achieved our first Accreditation as a TC Community which we are extremely proud of. Over the last review period our community has continued to change and grow with boys. 2022 has been successful in many ways for the community, we gained our first 'Outstanding' Ofsted rating in November and we won an award at the 'National Diversity Award' ceremony in September for 'Community Organisation for Age' category. The Oaks members have worked hard with really trying to understand each other and supporting each other through various meeting spaces and in daily life. The Oaks physical environment have made lots of positive changes with expansion to the grounds and physical appearance to the home. These are continuing to develop.

## Completed Action Plan 2021-2022

Standard Identified for improvement	Planned Action	Outcome
<p><b>1.1.1 - Staff members can describe their way of working used by their Therapeutic Community.</b></p>	<p>Include sections in training about therapeutic community practice in the training module for working with children who display sexualized behaviour.</p>	<p>Therapist Heidi has developed and updated the GLM/HSB training and now includes more detail. This was rolled out from March 2022.</p>
<p><b>1.1.2 - Community members can describe the therapeutic ethos and are able to give examples of practice to demonstrate this.</b></p>	<p>Staff meetings used to discuss and embed understanding of our ethos.</p> <p>All staff learn through induction period about The Oaks Community life. Through training, supervision and various groups the understanding and meaning of our culture is embedded.</p> <p>All staff to complete GLM training, introduction to TC training.</p> <p>Extended community meetings used to explore and describe the ethos. This to be minuted.</p>	<p>Heidi has delivered HSB/GLM training to the Oaks community staff throughout 2022. It continues that the community ethos is discussed regularly in all meetings and daily life.</p>
<p><b>1.4.2 - Children and young people and care staff take on a variety of roles within the Therapeutic Community</b></p>	<p>Roles for boys to be decided in the extended community meeting. New roles to be developed and reviewed every 3 months.</p> <p>Staff community roles to be reviewed every 3 months also.</p>	<p>Roles were discussed and implemented at points throughout 2022. Roles have changed due to boys leaving and new boys joining. We are currently reviewing these roles again due to role changes.</p>

<p><b>1.7.5 - Cultural and personal differences in communication are recognised and valued.</b></p>	<p>Some themed meetings and more discussion around sexuality, gender, cultural and personal differences to be explored regularly. Use of language in the community to be explored. E.g. 'the boys'</p>	<p>This has been ongoing and a theme of some community meetings throughout the past year. PSHE in school, therapy sessions and key worker sessions have also been used to discuss this subject.</p>
<p><b>1.10.1 - The community to review the use of time limited roles , such as 3/6 months to ensure that young people have the ability to progress through a variety of roles.</b></p>	<p>Chairman, deputy chairman and other roles to be discussed, decided and evidenced. Chairman and Deputy to meet with Marie to discuss roles – review, identify targets and how to move forward with roles. This to be evidenced. Roles to be reviewed in extended community meetings also.</p>	<p>Roles have been discussed and decided in extended community meetings during 2022. Roles related to school were discussed and decided in school council meeting with boys and teachers.</p>
<p><b>1.10.3 - There is a process in place to gain input from children and young people and staff into each other's reviews or appraisals For example using a 360-degree feedback.</b></p>	<p>Evidence feedback for appraisals that is clearer and taken forward for development.</p>	<p>The young people do feed into 360 appraisal feedback. This has been done gathering feedback during extended meetings. This could be done more formally in a consistent way.</p>
<p><b>2.3.3 - Staff receive experiential training. For example Living/Learning workshops, groups relations courses.</b></p>	<p>Staff to attend some experiential training/workshops throughout 2022.</p>	<p>There have been various workshops that staff have attended. However we are planning to devise a program with an external expert to facilitate during 2023 for Amberleigh staff.</p>
<p><b>2.5.4 - A possible experienced external TC facilitator to be arranged for staff dynamics.</b></p>	<p>To be explored</p>	<p>No external facilitator has been sought as it is felt that the therapy manager is currently is connected enough with the community where staff feel comfortable in the space but not connected to daily life and the Oaks. Marie does line manage the therapist; however it is felt the current situation works well and is consistent.</p>

<p><b>3.3.1 - Set up a 'welcome committee' for new members that join the community including a member from each department and a young person. This is to involve meeting a new member together and working on the 'welcome book' improvements.</b></p>	<p>Welcome Committee to be set up as new group of young people. This to be discussed and explored during an extended meeting and gather ideas from the boys.</p>	<p>This remains a development area for the next cycle.</p>
<p><b>3.3.4 - The community may want to think about include marking new members of staff in the same way that young people's arrival is marked. Both are marked in different ways.</b></p>	<p>The welcome committee to explore this and use the same ways of welcoming staff into the community. This to be embedded into the Oaks culture.</p>	<p>To be developed during the next cycle.</p>



## **Lead Reviewer's Comments**

This section will provide an overall view of the visit and of the community, based on all elements of the review process.

The Oaks thoroughly prepared for their peer-review visit. This was evidenced by having material supporting their self-review within the review team meeting room. The Senior Management Team (SMT) were available to answer any questions throughout the day. Both staff and the boys were happy to engage with us and were open and honest about life at The Oaks. Being involved in a Community Meeting helped the review team observe how tasks and challenges are worked through together. It was felt that this was a very productive and invaluable day for both parties.

Lead Reviewer – Niamh Roberts

## Community Feedback

At the end of the review day, the community were asked to complete a feedback form to share their feelings around the review day.

### **Thinking about the day generally, tell us how the review went...**

Our community feel that the review went well overall. We would have liked to have spent more informal time together with the review team but we are aware we wanted to try and allow for as much exploration of the community possible on the day.

### **Tell us what you learnt from the review...**

We learned that we have enjoyed having visitors face to face. We learned that that there are other communities have some similarities to ours and also lots of differences from talking and sharing with the peer review team.

### **Did you enjoy taking part and preparing for the review day?**

Yes we all enjoyed the day and preparing from it together! It was a new experience for a lot of our members.

### **What else would you like to gain from a peer review visit?**

More informal time so the team can see and feel what it's really like to live at The Oaks.

### **Did you find completing the self-review helpful and were you able to learn from this process?**

We did but we are aware that we need to spread out the filling in of the form for the next visit which will be our accreditation.

### **Was the self-review a helpful tool in identifying areas of improvement and areas of achievement for your community?**

Yes, this has been extremely helpful and we have lots of ideas we can be thinking about to make improvements.

### **Is there anything else you would like to see in the self and peer review process?**

No

### **If you could add anything new to the review process, what would it be?**

Nothing apart from having more time to share what it's like to be a member in our community.

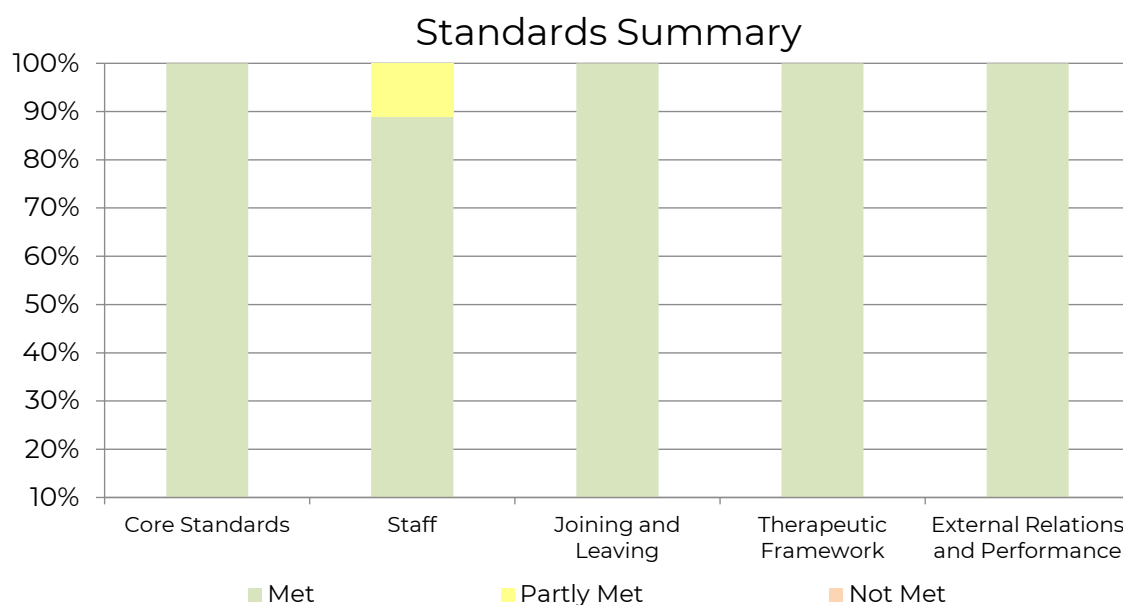
## Summary of Results – Self and Peer Review

### Numerical Summary of criteria reviewed on the peer-review day

	Total no. of standards reviewed	No. of standards met	No. of standards partly met	No. of standards not met	No. Of standards not applicable
<b>Core Standards</b>	45	45	0	0	0
<b>Staff</b>	18	16	2	0	0
<b>Joining and Leaving</b>	15	14	0	0	1
<b>Therapeutic Framework</b>	20	20	0	0	0
<b>External Relations and Performance</b>	12	12	0	0	0
<b>Total</b>	110	97%	2%	0%	1%

### Graph of Results

The graph in the figure below breaks down the number of criteria met, partly met and not met for each of the sections of the standards. This is based on a combination of self-review and peer-review scores. Where the peer review team has not covered a standard, the self-review score is taken into account.



## Summary of Results – Self and Peer Review

**Numerical summary of the criteria, scored by the community at peer-review.**

**Key:** Type 1 – Essential (accreditation), Type 2 – Expected (accreditation), Type 3 – Desirable (accreditation)

Acc level	Type 1			Type 2			Type 3		
Score	Met	Partly Met	Not Met	Met	Partly Met	Not Met	Met	Partly Met	Not Met
<b>Core Criteria</b>	25	0	0	16	0	0	4	0	0
<b>Staff</b>	12	0	0	3	1	0	1	1	0
<b>Joining and Leaving</b>	10	0	0	3	0	0	1	0	0
<b>Therapeutic Framework</b>	9	0	0	8	0	0	3	0	0
<b>External Relations and Performance</b>	4	0	0	5	0	0	3	0	0
<b>Total %</b>	<b>100%</b>	<b>0%</b>	<b>0%</b>	<b>97%</b>	<b>3%</b>	<b>0%</b>	<b>92%</b>	<b>8%</b>	<b>0%</b>

## Summary of Results – Peer Review

### Areas of Achievement

- It was evident on the review that the community clearly takes pride in creating long-lasting memories together. Both the boys and staff spoke highly of activities and celebrations they have enjoyed as a community, these included Halloween, concerts, and competitive sports games. The boys were happy to show the review team many photographs around the house and sharing stories with us.
- In the staff meeting, staff described how being an active member of the community has helped their personal development. Excellent examples of how being a part of the TC has allowed them to be more reflective, self-aware and engage more constructively to feedback. This demonstrates how well-rounded the approach taken at the TC is and impacts all members of the community.
- It was great to see the boys offering advice to one another on ways of coping with challenging feelings. The boys were receptive to these tips and tricks which seemed helpful. One poignant example was a sensory grounding technique that one of the boys exemplified.

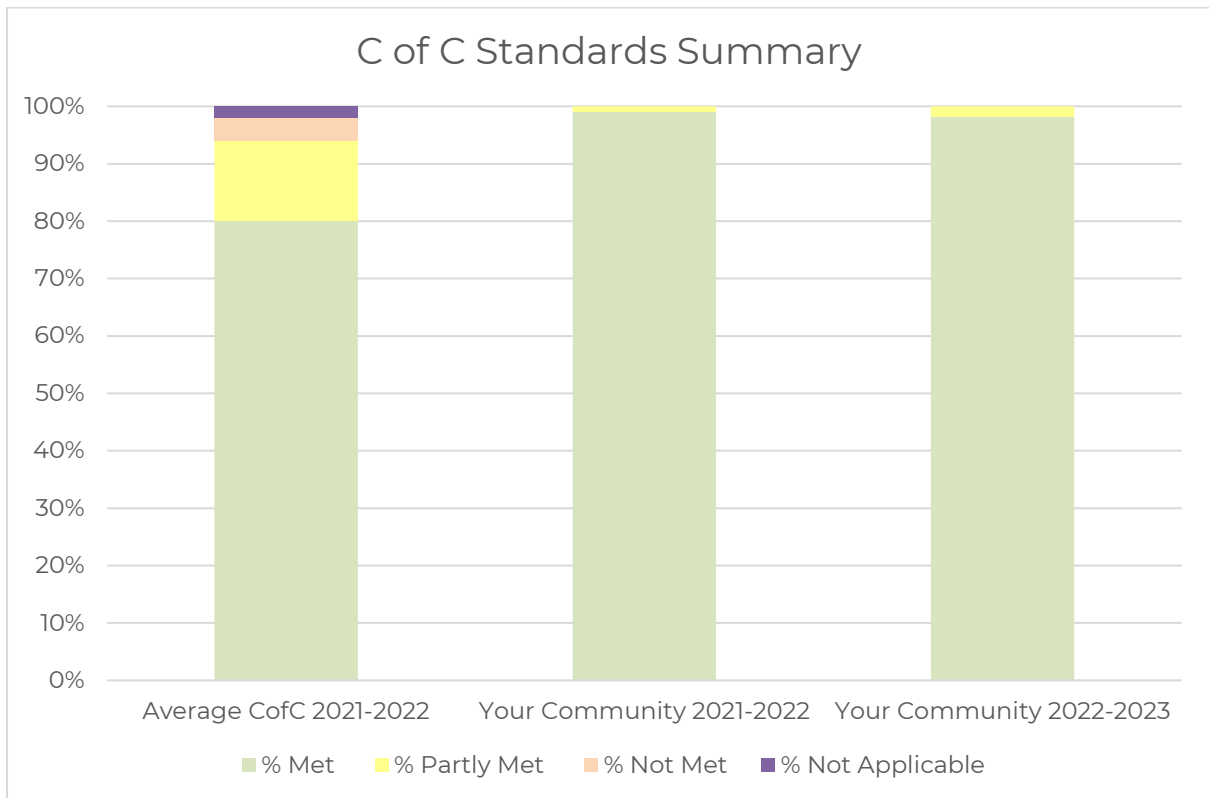
### Areas of Development

- While some of the staff were able to describe the Good Lives Model, when asked how this is embedded into practice some of the more long standing members needed prompting. It was felt that perhaps engaging in 'refresher' training on how the GLM and HSB is embedded day-to-day may be useful.
- Based on current events, the review team felt that the community should continue to work on encouraged the boys and staff to bring concerns about each other to groups. Perhaps considering why the idea of "telling tales" should be challenged and why it is important that the boys bring concerns to group with regards to safeguarding.
- It was felt that there have been some challenges and negative feelings associated with endings of staff for some of the boys. The TC is clearly working through this together, and the review team understood that this may take some time. The community should continue to explore these together more in keyworker sessions with specific boys, explaining why endings occurred and the importance of challenging inappropriate behaviour.

## Summary of Results – 2021-2022 Benchmarking

The graph below represents the average percentage of standards and criteria met, partly met and not met by the whole Community of Communities membership in the previous year (2021-2022 cycle).

This has been compared with the percentage number of standards and criteria met, partly met and not met by your community during the previous year (where available) and this current year (2022-2023<sup>1</sup>)<sup>2</sup>.



<sup>1</sup> The number of met, partly met and not met includes the self-review scores for the criteria and the peer-review scores of the standards.

## Summary of Achievements and Developments from Self and Peer-Review

Core Standards		
Stand/ Criteria No.	Areas of Achievement	Self or Peer- Review
1.4.1	The boys involvement in the management meetings represents how decisions that affect the running of the TC are made collaboratively and provides a space for the boys to feel more included in higher decision making.	Peer-Review
1.6.1	The growth and development of the physical space of the TC was seen as excellent by the review team. This is with specific reference to the independence spaces and recreational / media rooms.	Peer-Review
1.6.2	The review team felt that the TC clearly takes pride in creating memories together. This was evidenced by discussions around activities and celebrations together, along with reminder photographs around the home (Halloween, concerts etc) and school (Duke of Edinburgh).	Peer-Review
1.6.3	The staff team noted how receptive the boys can be to their emotions when they come into work feeling slightly 'off'. They spoke openly how this will allow them to speak to one another about their life experiences but always within the boundaries of the confidentiality policy. The review team felt that this demonstrated how caring the boys can be to staff.	Peer-Review
1.7	The Oaks have worked particularly hard with this during the last review period. There is regular honest open discussion where emotions can be expressed confidently and supported by each other. The community have worked hard in creating a safe environment and particular spaces where this can happen. The extended community meetings have been an area of strength where boys feel able to share difficult and sensitive feelings aswell as challenging each other.	Self-Review
1.7	We feel that we have worked particularly hard in this area over the review period.	Self-Review
1.7.3	It was felt that the community is doing this well and aims to work around differences in this area. The review team observed a lively discussion around humour and jokes made at the community. Each member provided	Peer-Review

	their own insight and interpretation of jokes currently being made and it was understood that these can have a different effect on one person to the next.	
1.9.1	The review team observed staff and the boys offering advice on ways of coping with challenging feelings. There were a number of excellent examples that even the review team could use individually going forward. One specific example included one of the boys extended his learning to others from using sensory grounding techniques (hand movement).	Peer-Review
1.10.4	This is encouraged on a daily basis during community meetings and informal discussion. Community members are aware that we are all engaged in an environment where views and opinions are heard. This has been an area of achievement over the last review period.	Self-Review
1.10.4	We feel we have worked extremely hard on this to build it into our culture with being open, transparent and supportive in doing so.	Self-Review
1.10.5	Positive risk taking is discussed regularly in the community and all members contributed to the 'Positive Risk Taking Policy. This is reviewed regularly and discussed as a community. Boys personal plan reviews are a space to move forward with positive risk talking. Staff meetings, large community meetings, community meetings, school council meetings are all spaces where opportunities are discussed. This has been an area of movement and strength over the last review period.	Self-Review
1.10.5	We have worked hard as a holistic team and with the young people in moving forward with positive risk taking. This is discussed and evidenced as party of the review process.	Self-Review
1.10.6	During the staff meeting with reviewers, staff provided excellent examples of how being a part of the TC has allowed them to be more reflective, self-aware and engage more constructively to feedback. This demonstrates how well-rounded the approach taken at the TC is and impacts all members of the community.	Peer-Review
<b>Stand/ Criteria No.</b>	<b>Areas for Development</b>	<b>Self or Peer- Review</b>
1.1.1	When asked about the way of working used at their TC, some of the long standing staff needed more prompting by others to describe the Good Lives Model	Peer-Review



	(GLM)and how this is embedded throughout the working week. The review team felt that staff should engage in a 'refresher' on how the GLM and HSB is embedded into practice.	
1.4.2	There are a number of roles and tasks that are shared. For example, the boys chair the meetings, different boys prepare the community daily lunch, boys are involved in interviewing. Staff also fulfil different functions within the team. This is an area we wish to develop more over the next review period. We have had boys in the role of Chairman and Deputy and when reviewed it was felt there was either a break needed as discussed and evidenced through community discussion or rules have been broken several times where the young person was no longer able to remain in the role.	Self-Review
1.4.2	This is something The Oaks want to focus more on within the next review period.	Self-Review
1.6.2	While it is great to hear that food is prepared by members of the community, the review team wondered how certain food is chosen and whether alternatives can be provided to those that do not like the option available that day.	Peer-Review
1.7.5	Perhaps the TC could provide a space for the boys to learn sign-language for to further support current members at the TC.	Peer-Review
1.9.4	Perhaps the community should continue to work around being encouraged to bring concerns about each other to groups. Perhaps considering why the idea of "telling tales" should be challenged and why it is important that the boys bring concerns to group due to safeguarding and safety.	Peer-Review
1.10.3	We are aiming to focus on this being more consistent over the next review period.	Self-Review

<b>Staff</b>		
<b>Stand/ Criteria No.</b>	<b>Areas of Achievement</b>	<b>Self or Peer- Review</b>
2.2.2	The review team particularly enjoyed hearing about how staff from the school are involved in activities outside of the normal school day. For example, the head teacher participating and supporting the boys gain their Duke of Edinburgh Awards.	Peer-Review
2.5.1	The review team felt that having staff dynamics groups for individuals departments worked incredibly well and demonstrates an understanding of different needs across the staff team and service.	Peer-Review
<b>Stand/ Criteria No.</b>	<b>Areas for Development</b>	<b>Self or Peer- Review</b>
2.1.1	It was suggested that the interview questions forwarded by the boys need to be revamped. Perhaps the boys could continue to work on developing questions that allow them to make a sound decision on new staff.	Peer-Review
2.3.3 ★	Although we have moved forward with this with specific staff we aim to open this up for all staff and arrange a living learning workshop that staff can experience other than what we have learnt from in this cycle.	Self-Review
2.3.3 ★	Continue to work on engaging with an external living-learning programme that is facilitated by an experienced individual.	Peer-Review
2.5.3	Perhaps the community should work towards cementing time into each month for the staff dynamics group to occur. For example, every third Wednesday of each month at 3.30pm.	Peer-Review

<b>Joining and Leaving</b>		
<b>Stand/ Criteria No.</b>	<b>Areas of Achievement</b>	<b>Self or Peer- Review</b>
3.4.1	The review team felt that the lifestory book is an excellent reflective piece of work that is contributed to by all members sat this time. Leavers can use these books to recognise their journey and to remember the TC from.	Peer-Review
3.4.3	The end of term ceremony for school is an excellent opportunity for the boys to recognise their achievements through awards and feedback by staff.	Peer-Review
<b>Stand/ Criteria No.</b>	<b>Areas for development</b>	<b>Self or Peer- Review</b>
3.3.1 ☆	During the next cycle we wish to work on boys roles of responsibility as the 'Welcome Committee'. We have a job description for this and we have had previous boys in this role. Due to change of boys and within the community this/these roles need to be established again to support community members joining.	Self-Review
3.3.1 ☆	While the boys and staff are involved in the planning and preparation for the arrival of new members, the community should continue to work on the boys roles with regard to the 'Welcome Committee'.	Peer-Review
3.3.4	The community should work towards having a similar marking of arrival into the community for the boys and staff.	Peer-Review
3.4.2	It was felt that there have been some challenges and negative feelings associated with endings of staff for some of the boys. The TC is clearly working through this together, and the review team understood that this may take some time. The community should continue to explore these together more in keyworker sessions with specific boys, explaining why endings occurred and the importance of challenging inappropriate behaviour.	Peer-Review

Therapeutic Framework		
Stand/ Criteria No.	Areas of Achievement	Self or Peer- Review
4.1.3 ★	There is a strong triangulation approach between care, therapy and education at the TC. There is constant communication between each department to ensure a consistent approach. This includes morning meetings, debriefs and handovers after each day to discuss how the day has gone.	Peer-Review

<b>External Relations and Performance</b>		
<b>Stand/ Criteria No.</b>	<b>Areas of Achievement</b>	<b>Self or Peer- Review</b>
5.3	This has been an achievement over the last cycle. We have been involved in various external presentations including the C of C Annual Forum, NOTA conference, TCTC CYP group, TCTC international conference, going out (or online) on peer reviews, the therapy team have set up an external working group with other communities to share best practice and gain ideas, We have won an award with the National Diversity Awards during the last cycle and gained lots of positive publicity from this,	Self-Review
5.3	This has been an area of achievement over the review period.	Self-Review
<b>Stand/ Criteria No.</b>	<b>Areas for Development</b>	<b>Self or Peer- Review</b>
5.3.2 ★	Our plan is to look into offering a student placement over the next review period.	Self-Review
5.3.2 ★	While not spoken about specifically on the review, the review team felt that a university student placement would be an excellent opportunity and feel that this is a good area for development.	Peer-Review

## The Review Workbook

**REVIEW SCORING: 0=NOT MET, 1=PARTLY MET, 2=MET, 9=NOT APPLICABLE, N=Not discussed**

**Accreditation Levels (for your information): 1 = Essential, 2 = Expected, 3 = Desirable**

Standard Number	Type	STANDARD	Self-Review score	Self-Review Comment	Peer Review score	Peer Review Comment
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### Core Standards

#### 1.1 There is a clear way of working which supports the principles of the Therapeutic Community

1.1	1	<b>There is a clear way of working which supports the principles of the Therapeutic Community</b>	<b>Met</b>	All community members are able to describe the therapeutic ethos at The Oaks. Members are confident in sharing how they think and reasons for 'why they do the things they do' and relate these to their therapeutic community principles.	<b>Met</b>	This standard is met. The community has a clear way of working that supports principles of the TC.
1.1.1	1	Staff members can describe the way of working used by their Therapeutic Community	<b>Met</b>	The community works within the TC framework and the conceptual framework used to respond to the boys individual needs is the good lives model. We have implement the Good Lives Model in personal plans reviews and in placement plans.	<b>Met</b>	Staff were able to describe how they work together as a community at the TC, and while it was explained that the Good Lives Model is used as a basis for the way of working at the TC, the review team felt that not all staff were comfortable in talking about how this model is embedded throughout the working week.  Area of Development: When

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**Accreditation Levels (for your information): 1 = Essential, 2 = Expected, 3 = Desirable**

Standard Number	Type	STANDARD	Self-Review score	Self-Review Comment	Peer Review score	Peer Review Comment
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						asked about the way of working used at their TC, some of the long standing staff needed more prompting by others to describe the Good Lives Model (GLM) and how this is embedded throughout the working week. The review team felt that staff should engage in a 'refresher' on how the GLM and HSB is embedded into practice.
<b>1.1.2</b>	<b>2</b>	Service users can describe the way of working used by their Therapeutic Community	<b>Met</b>	The boys have an understanding of the model of practice and are able to describe the culture at The Oaks. We avoid jargon and 'professional language' as it is important that the house is the boys home. The boys are confident and eager to talk to visitors about their home and community and can discuss the function of meetings etc.	<b>Met</b>	The boys were able to do this throughout the review day.
<b>1.1.3</b>	<b>1</b>	The Therapeutic Community leadership functions in a way	<b>Met</b>	All staff work together to ensure the effective running of the	<b>Met</b>	The TC aims to operate democratically and this was

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**Accreditation Levels (for your information): 1 = Essential, 2 = Expected, 3 = Desirable**

Standard Number	Type	STANDARD	Self-Review score	Self-Review Comment	Peer Review score	Peer Review Comment
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		that is consistent with their community's way of working				community. Democratisation and non-hierarchical decision making are central to our working practice.		observed on the review day.
1.1.4 	2	There is evidence of commitment to the Therapeutic Community approach by the wider organisation within which the community sits. For example, a Strategic or Business plan	<b>Met</b>		<b>Met</b>	Amberleigh directors issue a strategic plan that incorporates the TC status, and this is also part of our statement of purpose and widely promoted in our literature. Our therapeutic community core training (day 1, 2 and 3) has been developed and delivered. We have also made a commitment to ensure a number of staff have been part of TC events, peer lead reviewer training and attending peer reviews. There is a supportive and committed approach to the therapeutic community and its continuous development.	<b>Met</b>	Amberleigh Care are committed to the TC approach, as evidenced by both services (The Oaks and Gofa Hall) holding membership with CofC. The TC ensures that all staff are trained in the TC core competencies both at induction and throughout the time at the service. The review team did not view the strategic business plan issued by directors.
1.1.5 	1	The leadership of the community facilitates, and role models a reflective culture	<b>Met</b>		<b>Met</b>	All leaders role model and are continually developed internally and externally to be reflective in	<b>Met</b>	This was evidenced on the review.



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		where difficulties can be contemplated and considered.				themselves. There are various spaces for the community to discuss difficulties and accept differences. E.G. group dynamics spaces, team meetings, group supervision, lien supervision, clinical supervision.
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### 1.2 Service users and staff are aware of the culture and practices within the Therapeutic Community

1.2	1	<b>Service users and staff are aware of the culture and practices within the Therapeutic Community</b>	<b>Met</b>		<b>Met</b>	The boys and staff are aware of the culture and practices at the TC.
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						might feel like, we have a video that is shown and we have boys show potential new boys around when they visit here also.
1.2.1 ☆	2	The Therapeutic Community provides information to new Service users and staff that describes the expectations of community membership	<b>Met</b>		<b>Met</b>	We have an induction for staff which includes a half day induction training which explains the community approach and the expectations. Prior to a young person joining the community we visit them and tell them about the community and expectations of community membership. We also, where possible, ensure the young person visits prior to them joining us so they can see further what community living is like. We have developed a 'video tour' that we show to possible new boys so they get a sense of where they are visiting and what the community looks like.
1.2.2	1	Service users and staff can describe the culture and	<b>Met</b>		<b>Met</b>	Our community members can describe the therapeutic ethos
						There is an informative process for new members to understand the expectations of membership. These include, but are not limited to, senior management visits to the boys prior to joining and the recruitment process for staff.
						This was evidenced on the review day.

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		practices within the Therapeutic Community.		and are able to give examples of practices to demonstrate this.		
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### 1.3 Service users and staff work together to review, set and maintain rules and boundaries

<b>1.3</b>	<b>1</b>	<b>Service users and staff work together to review, set and maintain rules and boundaries</b>	<b>Met</b>		<b>Met</b>	This standard is met. The boys and staff work together to set and maintain rules and boundaries at the TC.
<b>1.3.1</b>	<b>1</b>	Service users and staff can describe and evidence the process of reviewing and setting community rules and boundaries	<b>Met</b>	There are clear expectations regarding community membership and these are reinforced within community meetings and integrated reviews. Our boys are involved in setting and reviewing of rules regularly. This usually done during our extended community meetings. We have a signed induction checklist for staff and we also have a signed young persons contract at the start of their placement.	<b>Met</b>	Extended community meetings, which are attended by senior management, staff and the boys at the local town hall, are used as a space to refresh, renew and set rules/boundaries. It was explained that anyone can bring forward new rules/boundaries and these are discussed as a community. Reviewing and setting rules/boundaries comes as a result of behaviour/challenges at the TC (e.g., social media use).

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1.3.2	1	Service users and staff can describe the process that follows breaking rules and boundaries, including their involvement in that process	<b>Met</b>	Some rules and boundaries are more fixed (i.e. supervision) others can be negotiated and explored. When rules/boundaries are broken this is explored within the community meetings and staff meetings.	<b>Met</b>	The breaking of rules and boundaries are always spoken about with the community. However, it was confirmed that the process and actions that follows the breaking of rules/boundaries is flexible and dependent on a number of factors.
1.3.3 ☆	2	The Therapeutic Community keeps records of rule and boundary breaks and actions taken	<b>Met</b>	There is a record of community meeting minutes and discussions that cover this area. We record all discussions during these meetings where we are able to capture the process.	<b>Met</b>	Records of rule and boundary breaks, including actions taken, are recorded in community meeting minutes. Meeting minutes are taken both by a member of staff and the vice chair.
<b>1.4 Service users and staff take part in the day to day running of the Therapeutic Community</b>						
1.4	1	<b>Service users and staff take part in the day to day running of the Therapeutic Community</b>	<b>Met</b>	Our boys take part in the day to day running by being part of the start of the days plan during a community meeting. Another community meeting is held at the end of the school day where	<b>Met</b>	This standard is met. Everyone at the community is involved in its day-to-day running.

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						evening plans are discussed and decided. Other meetings such as activity planning meetings, extended community meetings, large community meetings etc are where inclusion takes place.	
<b>1.4.1</b>	<b>1</b>	Decisions that affect the running of the Therapeutic Community are made in collaboration with Service users and staff	<b>Met</b>		<b>Met</b>	The community meeting is used for decision making and news to be shared. We have also called special meetings when there have been pressing matters that need to be discussed/explored. Over the review period a young person represents the boys at Management meetings. The boys have also been involved in a whole community meeting with all the staff (care, education and therapy) present.	As per the self-review, the community meeting is used to collaboratively make decisions. This involves all boys and staff present on the day.  Area of Achievement: The boys involvement in the management meetings represents how decisions that affect the running of the TC are made collaboratively and provides a space for the boys to feel more included in higher decision making.
<b>1.4.2</b>	<b>2</b>	Service users and staff take on a variety of roles within the Therapeutic Community	<b>Met</b>		<b>Met</b>	There are a number of roles and tasks that are shared. For example, the boys chair the meetings, different boys prepare	There are a variety of roles available at the community and examples were provided on the day.

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						the community daily lunch, boys are involved in interviewing. Staff also fulfil different functions within the team. This is an area we wish to develop more over the next review period. We have had boys in the role of Chairman and Deputy and when reviewed it was felt there was either a break needed as discussed and evidenced through community discussion or rules have been broken several times where the young person was no longer able to remain in the role. This is something The Oaks want to focus more on within the next review period.	
<b>1.4.3</b>	<b>3</b>	Roles with increasing levels of responsibility within the Therapeutic Community are achievable by Service users and staff	<b>Met</b>		<b>Met</b>	There is a structured use of two groups in the home Phoenix for younger boys and those at the earlier stages of their journey, Apollo for older boys on an independence programme and	Increasing levels of responsibility occur through the progression into the Apollo group from Phoenix.

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						with greater responsibility. There is a clear structure of roles for staff such as coordinators, link workers, group leaders etc. We review boys progress and levels of responsibility in their review boards and staff in their yearly appraisal.	
<b>1.4.4</b>	<b>1</b>	There is opportunity and management support for spontaneity	<b>Met</b>		<b>Met</b>	Management are intergrated in the community on a daily basis. Community members are aware that we have an open and honest ethos and support is at hand for any kind of spontaneity. We have a positive risk taking policy that reflects this.	Spontaneity occurs throughout the week on evenings and weekends with care staff. These are managed and discussed by management in community meetings when forwarded by the boys.
<b>1.4.5</b>	<b>1</b>	All Service users and staff can consider and question managerial processes and group and institutional dynamics	<b>Met</b>		<b>Met</b>	There are spaces and opportunity for this in quarterly large community meetings where everyone is together, the community chairman has attended management meetings, management and directors have attended extended community	Criterion not discussed on the review. Score taken from the self-review.

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						meetings and community gatherings.
<b>1.4.6</b>	<b>1</b>	Change is managed in a way that recognises the impact on Service users and staff.	<b>Met</b>		<b>Met</b>	Change is managed through groups available at the community. On the review change was spoken about with reference to endings at the community.
<b>1.5 There is a structured timetable of activities that reflects the needs of Service users and staff</b>						
<b>1.5</b>	<b>1</b>	<b>There is a structured timetable of activities that reflects the needs of Service users and staff</b>	<b>Met</b>		<b>Met</b>	This standard is met. There is a structured timetable of activities that reflects the needs of the boys and staff. There are other elements of the timetable that allow space for spontaneity in the evenings and weekends.
<b>1.5.1</b> ☆	<b>1</b>	The timetable includes a group meeting, commonly called the Community Meeting (or	<b>Met</b>		<b>Met</b>	There are 2x community meetings a day that take place in the morning and late afternoon.




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		Children's Meeting), which is central to the functioning of the Therapeutic Community and Service users and staff are expected to attend.				These are central to the running of the day.
<b>1.5.2</b>	<b>3</b>	The timetable of activities is reviewed regularly (minimum annually) with input from Service users and staff.	<b>Met</b>		<b>Met</b>	The structured timetable is reviewed once a year and discussed as a whole community to involve everyone in the decisions made. Other additional activities are discussed weekly in community meetings or in personal plan reviews for individuals.
<b>1.5.3</b> 	<b>2</b>	There is a process for monitoring and addressing attendance at timetabled activities	<b>Met</b>		<b>Met</b>	Criterion not discussed on the review. Score taken from the self-review.

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### 1.6 Service users and staff are encouraged to form a relationship with the Therapeutic Community and with each other as a significant part of community life

<b>1.6</b>	<b>1</b>	<b>Service users and staff are encouraged to form a relationship with the Therapeutic Community and with each other as a significant part of community life</b>	<b>Met</b>	<p>This is the key element for us when explaining what we are expected to be part of when we join the Oaks. Positive relationships we form is paramount in connecting with each other. Reflecting and learning through relationships is what we focus everything around. This is explained in detail when we have any new joiners to the community.</p>	<b>Met</b>	<p>The boys and staff are encouraged to form a relationship with the TC and each other. This standard is met with areas of achievement and development outlined below.</p>
<b>1.6.1</b>	<b>2</b>	<p>Service users and staff work together to keep a clean, well-maintained physical environment</p>	<b>Met</b>	<p>There is a regular rota of community tasks around the house and grounds. All members of the community work together to ensure a clean and well-maintained environment.</p>	<b>Met</b>	<p>This was observed on the review day. The boys are responsible for their own personal spaces and are encouraged to keep them clean by staff. For more communal spaces, a rota is used.</p> <p>Area of Achievement: The growth and development of the physical space of the TC was seen as</p>

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						excellent by the review team. This is with specific reference to the independence spaces and recreational / media rooms.
<b>1.6.2</b>	<b>1</b>	Service users and staff share informal time together, including meal times and recreation	<b>Met</b>	The community eat together daily, and the meals are prepared by members of the community. This is an important time in the day when we all come together. The boys and staff spend a great deal of informal time together taking part in a range of activities both in the house and externally.	<b>Met</b>	<p>All TC members eat together daily, at lunch and dinner.</p> <p>Area of Achievement: The review team felt that the TC clearly takes pride in creating memories together. This was evidenced by discussions around activities and celebrations together, along with reminder photographs around the home (Halloween, concerts etc) and school (Duke of Edinburgh).</p> <p>Area of Development: While it is great to hear that food is prepared by members of the community, the review team wondered how certain food is chosen and whether alternatives can be provided to those that do not like the option available that</p>

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						day.
<b>1.6.3</b>	<b>3</b>	Service users and staff encourage each other to share their life experiences, within the boundaries of the confidentiality policy agreed with the Therapeutic Community.	<b>Met</b>	This has become embedded within the community and has been particularly noticeable in the extended community meetings. This is also done in informal spaces and in PSHE and individual sessions.	<b>Met</b>	Life experiences are shared within the boundaries of the confidentiality policy.  Area of Achievement: The staff team noted how receptive the boys can be to their emotions when they come into work feeling slightly 'off'. They spoke openly how this will allow them to speak to one another about their life experiences but always within the boundaries of the confidentiality policy. The review team felt that this demonstrated how caring the boys can be to staff.
<b>1.6.4</b>	<b>1</b>	Issues of power and authority in relationships are openly discussed. For example, but not limited to, bullying or structural hierarchies.	<b>Met</b>	Community meetings are regularly used for this and the boys are able to be honest about their views which is a positive reflection of the safety of this space. The staff team have dynamic groups which also	<b>Met</b>	On the review there was an in-depth discussion around bullying during the community meeting. This demonstrated that issues around power can be discussed openly and worked through continuously.

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						encourages the exploration of these issues within relationships. Staff supervision and dynamics space continues to develop with care and education.	Issues of power and authority in staff relationships was not discussed on the review.
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<b>1.6.5</b>	<b>2</b>	Service users and staff value and accommodate each other's different abilities and are sensitive to these differences.	<b>Met</b>		<b>Met</b>	Staff and Young People value and accommodate each others' different abilities and are sensitive to these differences. These differences are discussed in community meetings, daily informal time, school, link worker sessions, therapy, staff meetings, management meetings.	Excellent demonstrations of staff and the boys valuing each others' abilities and being sensitive to these. This included providing space and time for individuals to have a say in discussions on the day.
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### 1.7 All behaviour and emotional expression is open to discussion within the Therapeutic Community

<b>1.7</b>	<b>1</b>	<b>All behaviour and emotional expression is open to discussion within the Therapeutic Community</b>	<b>Met</b>		<b>Met</b>	The Oaks have worked particularly hard with this during the last review period. There is regular honest open discussion where emotions can be expressed confidently and supported by each other. The community have worked hard in	This standard is met with an area of achievement outlined.
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						creating a safe environment and particular spaces where this can happen. The extended community meetings have been an area of strength where boys feel able to share difficult and sensitive feelings as well as challenging each other. We feel that we have worked particularly hard in this area over the review period.	
<b>1.7.1</b>	<b>1</b>	Service users and staff are encouraged and supported to put thoughts and feelings into words	<b>Met</b>		<b>Met</b>	Staff are supported through groups like dynamic spaces and clinical supervision to explore their thoughts and feelings. As a wider community the community meetings also act as a forum for young people and staff to put their thoughts and feelings into words. This also occurs in 1-1 work and school. We have also had extended special community meetings with all staff and boys present.	As per self-review.

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<b>1.7.2</b>	<b>1</b>	Service users and staff support each other to be reflective and non-judgemental when responding to issues raised in the Therapeutic Community	<b>Met</b>		<b>Met</b>	This happens in a number of forums, such as the community meetings, key work sessions, 1-1 therapy, school meetings, staff meetings, large community meetings.	<b>Met</b>	This was observed on the review day during a community meeting. This is also encouraged in spaces outlined in the self-review.
<b>1.7.3</b>	<b>1</b>	Service users and staff talk to one another about their own behaviour and the effect it has on others	<b>Met</b>		<b>Met</b>	We are a very open community and the community meeting offers a safe place for both staff and boys to be open with each other about their feelings. This also happens regularly on an informal basis. The boys and staff place items on the community agenda and a significant part of the meeting is about exploring each other's behaviours and the impact this has. Staff dynamics, group supervision and clinical supervision are also spaces for supported reflection.	<b>Met</b>	Area of Achievement: It was felt that the community is doing this well and aims to work around differences in this area. The review team observed a lively discussion around humour and jokes made at the community. Each member provided their own insight and interpretation of jokes currently being made and it was understood that these can have a different effect on one person to the next.
<b>1.7.4</b>	<b>2</b>	Service users and staff consider and discuss their attitudes and	<b>Met</b>		<b>Met</b>	As described in 1.7.3	<b>Met</b>	This was observed on the review, where staff were encouraging the boys to bring attitudes and

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		feelings towards each other				feelings towards one another to the group.
<b>1.7.5</b>	<b>1</b>	Cultural and personal differences in communication are recognised and valued.	<b>Met</b>	Any differences are recognised and valued within our community. These discussions happen on a daily basis.	<b>Met</b>	The recognition and value of differences in communication were observed on the review.  Area of Development: Perhaps the TC could provide a space for the boys to learn sign-language for to further support current members at the TC.
<b>1.8 Everything that happens in the Therapeutic Community is treated as a learning opportunity</b>						
<b>1.8</b>	<b>1</b>	<b>Everything that happens in the Therapeutic Community is treated as a learning opportunity</b>	<b>Met</b>	Our culture is that we learn from everything that happens by reflecting. This is with positive and negative situations. We explore positive and negative incidents/experiences regularly as a group so we can also learn from each other.	<b>Met</b>	This standard is met.
<b>1.8.1</b>	<b>2</b>	Service users and staff discuss problems and their solutions before action is taken	<b>Met</b>	This happens formally in community meetings and staff meetings but also day to day as	<b>Met</b>	As per self-review. This is done in community meetings and day-to-day as opportunities arise.



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						opportunities arise. For staff, handovers and "on the hoof" discussion is an inevitable part of residential life in a group community. Such issues are also discussed in therapy, personal plan reviews and emergency meetings with the boys.		
<b>1.8.2</b>	<b>1</b>	There are reparative and non-punitive ways of resolving hurt, conflict and damage which work towards a meaningful outcome	<b>Met</b>		<b>Met</b>	We try to use realistic and meaningful natural consequences as a method to make reparation where there has been a difficulty. We avoid "sanctions". We continue to involve the boys more in these discussions and their views and opinions have informed staff decisions. The boys have also been directly involved in identifying consequences for themselves and others.	<b>Met</b>	As per self-review comment.
<b>1.8.3</b>	<b>2</b>	Service users and staff are encouraged to identify parallels between their	<b>Met</b>		<b>Met</b>	During community meetings the boys have been able to reflect on times in their life when they have	<b>Met</b>	Criterion not discussed on the review. Score taken from the self-review.

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		relationships, behaviour and perceptions outside of the Therapeutic Community and similar situations within the community				had similar experiences and how this impacted on them and how that parallels with situations happening in the here and now.	
<b>1.8.4</b>	<b>1</b>	Service users and staff understand how and why decisions are made	<b>Met</b>		<b>Met</b>	We have an open and honest culture where if decisions are made members are clear that transparency is imperative within our community. Clear explanations happen allowing members to discuss their feelings further.	Decisions that are made are frequently communicated in group and 1-1 sessions when questioned.
<b>1.8.5</b>	<b>1</b>	Service users and staff are conscious of the value of learning and gaining understanding from everyday living (living- learning environment).	<b>Met</b>		<b>Met</b>	Reflective spaces are always facilitated for community members. These are link worker sessions, community meal times, community meetings, group dynamics, group supervision, school council meetings and our TCCT training evidences the importance of learning in this area. This is embedded in our	The independence kitchen is a great example of how the boys can be conscious of the value of learning and gaining understanding from everyday living. This is also supported for the boys that do not have access to the independence kitchen as they cook the community's meals together supported by a

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						culture in a day to day basis.		member of staff. The review team appreciated and enjoyed the chilli con carne made on the review day!
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### 1.9 Service users and staff share responsibility for the emotional and physical safety of each other

<b>1.9</b>	<b>1</b>	<b>Service users and staff share responsibility for the emotional and physical safety of each other</b>	<b>Met</b>	The Oaks culture is that everybody within the community is thoughtful and considerate of each other at all times. We try to be aware and connected with how we are feeling and support each other.	<b>Met</b>	This standard is met with an area of achievement outlined.
<b>1.9.1</b>	<b>2</b>	Service users and staff offer one another advice on ways of coping with conflict, frustration and disappointment.	<b>Met</b>	Everyone is encouraged to help each other when struggling with ways to cope. The young people are confident in offering their advice to each other and sometimes to staff. Community meeting space is a useful time to share advise and engage others in different ways of thinking before acting in a situation.	<b>Met</b>	Area of Achievement: The review team observed staff and the boys offering advice on ways of coping with challenging feelings. There were a number of excellent examples that even the review team could use individually going forward. One specific example included one of the boys extended his learning to others from using sensory

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						grounding techniques (hand movement).
<b>1.9.2</b>	<b>2</b>	There are clear procedures in place if the Therapeutic Community needs to address concerns/difficulties outside the timetable of activities. For example, Emergency Meetings	<b>Met</b>	Emergency meetings take place if it's a necessity. Live issues/concerns/news are paramount within the community. Over the review period there have been several special meetings called in order to contain and support the dynamics within the community. Such issues have involved acts of violence, relationships with staff, disruptive behaviour.	<b>Met</b>	Concerns and difficulties can be addressed in emergency meetings. These meetings are time-bound and are used to address present issues in the community.
<b>1.9.3</b>	<b>2</b>	Service users and staff share an understanding of the use of physical contact in supporting each other.	<b>Met</b>	Given the histories of our boys and some of the risks they have presented, we have a very clear policy on how to maintain safe physical contact, warmth, hugs etc, whilst maintaining protection and safety. With this in mind, we are very proud that the community is a warm and open place where affection in all forms	<b>Met</b>	As per self-review.

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						is evident.
<b>1.9.4</b>	<b>1</b>	Service users and staff are encouraged to bring concerns about each other to groups. Fears around "telling tales" or "grassing" are openly discussed and there is an understanding of confidentiality and its limits.	<b>Met</b>		<b>Met</b>	<p>We have a very open culture where boys feel confident to use the community meeting and /or their relationships with adults to discuss when they have concerns. Boys are frequently able to challenge each other's and staff's behaviour openly and safely.</p> <p>It would have been good to engage in a discussion around this standard.</p> <p>Area of Development: Perhaps the community should continue to work around being encouraged to bring concerns about each other to groups. Perhaps considering why the idea of "telling tales" should be challenged and why it is important that the boys bring concerns to group due to safeguarding and safety.</p>
<b>1.9.5</b>	<b>1</b>	Service users and staff feel supported by the leadership	<b>Met</b>		<b>Met</b>	<p>The leadership in our community is a consistent key thread to support for all community members. Leaders are always present at community meetings, extended community meetings, large community meetings, emergency meetings, staff meetings, board reviews and</p> <p>Criterion not discussed on the review. Score taken from the self-review.</p>

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				available daily to support and create a rich nurturing environment.		
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### 1.10 Service users and staff are active in the personal development of each other

<b>1.10</b>	<b>1</b>	<b>Service users and staff are active in the personal development of each other</b>	<b>Met</b>	All boys are active in the development for each other, This is done in many ways. Boys give each other feedback on a daily basis during informal time, community meetings, school meetings and formally recorded feedback is gathered for all boys board review process.	<b>Met</b>	This standard is met with areas of development and achievement highlighted in the criteria below.
<b>1.10.1</b>	<b>2</b>	Service users and staff encourage each other to take on jobs and responsibilities in the Therapeutic Community based on their development	<b>Met</b>	There is a rota for a number of jobs and responsibilities, which are considered essential to support the emotional and social growth of the young people. There is also a clear process of moving towards increasing independence (subject to risk assessment). This is also discussed in quarterly personal	<b>Met</b>	Jobs and responsibilities are encouraged based on the development of the boys in community meetings or personal plan reviews. It was also suggested that boys receive money for performing and undertaking certain jobs, and the review team wondered whether this impacted why they these

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						<p>plan reviews to ensure that each young person's needs are being met.</p> <p>roles are taken up.</p> <p>Area of Development: One the day, the review team did not hear examples of staff taking on jobs and responsibilities outside of the requirements of their professional titles. Perhaps the community can think about this in more detail.</p>
<b>1.10.2</b>	<b>1</b>	Service users and staff are encouraged to give feedback to each other	<b>Met</b>		<b>Met</b>	<p>Boys give each other feedback in many ways at The Oaks. This is done informally and formally as described in 1.10. This is an integral part of our staff and boys learning from each other and being bale to process and understand others feedback. We spend a lot of time exploring this in many forums.</p> <p>Feedback can be given informally day-to-day and more formally in personal plans and appraisals.</p> <p>More comments on appraisal feedback see criterion 1.10.3 below.</p>
<b>1.10.3</b>	<b>3</b>	There is a process in place to gain input from Service users and staff into each other's reviews or appraisals. For	<b>Met</b>		<b>Met</b>	<p>We use 360 degree feedback in staff appraisals and we have an annual employee survey to feed into the development plan for the service. We have devised a</p> <p>It was confirmed that the boys are able to contribute to staff appraisals.</p> <p>Area of Development: The review</p>

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		example, using 360-degree feedback.				feedback form together for boys so they can feedback to each other that is part of their personal plan review. Boys discuss each other's progress generally and there is some informal input in community meetings. Boys can input their comments onto a feedback form to each other before personal plan reviews. We are aiming to focus on this being more consistent over the next review period.		team felt that the current approach to the 360 degree feedback criterion does not reflect comments made within the action plan. It was suggested on the review that this process is not done as formally due to a high number of feedback requests at the TC. Perhaps the TC should consider how this process could be implemented more formally and consistently.
<b>1.10.4</b>	<b>1</b>	Service users and staff support one another to develop their ability to confidently express their views and opinions	<b>Met</b>		<b>Met</b>	This is encouraged on a daily basis during community meetings and informal discussion. Community members are aware that we are all engaged in an environment where views and opinions are heard. This has been an area of achievement over the last review period. We feel we have worked extremely hard on this to build it into our culture	<b>Met</b>	This was evidenced on the review, where the boys and staff were encouraging one another to bring forward thoughts and feelings about the TC with the review team. It was felt that everyone within the TC was supportive of one another.



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						with being open, transparent and supportive in doing so.
<b>1.10.5</b>	<b>1</b>	Service users and staff are supported, by each other, to understand the opportunities and challenges of taking positive risks	<b>Met</b>		<b>Met</b>	Positive risk taking is discussed regularly in the community and all members contributed to the 'Positive Risk Taking Policy. This is reviewed regularly and discussed as a community. Boys personal plan reviews are a space to move forward with positive risk talking. Staff meetings, large community meetings, community meetings, school council meetings are all spaces where opportunities are discussed. This has been an area of movement and strength over the last review period. We have worked hard as a holistic team and with the young people in moving forward with positive risk taking. This is discussed and evidenced as party of the review process.
<b>1.10.6</b>	<b>2</b>	Service users and staff can	<b>Met</b>		<b>Met</b>	There are various spaces that  The boys provided examples of

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		describe how being an active member of the community helps their development.		members have to explore their development along with the daily environment. Members are encouraged to support each other in recognising development openly.		<p>how being an active member of the TC has helped their development.</p> <p>Area of Achievement: During the staff meeting with reviewers, staff provided excellent examples of how being a part of the TC has allowed them to be more reflective, self-aware and engage more constructively to feedback. This demonstrates how well-rounded the approach taken at the TC is and impacts all members of the community.</p>
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### Staff

#### 2.1 The staff selection process reflects the ways of working within the Therapeutic Community.


2.1	1	<b>The staff selection process reflects the ways of working within the Therapeutic Community.</b>	<b>Met</b>	As in 2.1.1	<b>Met</b>	This standard is met. Staff selection processes appear to be in line with the way of working at the TC.
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<b>2.1.1</b>	<b>1</b>	Service users and staff are involved in the recruitment of new staff members	<b>Met</b>	Part of the interview process is that one young person prepares and asks questions during interview. Then potential new members of staff invited to share a mealtime with the community. This has happened on many occasions over the review period.	<b>Met</b>	Interviews for new staff include relevant staff team and one of the boys from the TC. If successful at the interview stage, new staff are invited to visit the community and share a meal together. This allows all staff and the boys to be involved in the recruitment of new staff.  Area of Development: It was suggested that the interview questions forwarded by the boys need to be revamped. Perhaps the boys could continue to work on developing questions that allow them to make a sound decision on new staff.
<b>2.1.2</b> 	<b>1</b>	Core competencies related to working within a Therapeutic Community are used to assess the suitability of staff. For example, TC Practitioner Competencies Framework	<b>Met</b>	The therapeutic community core competencies inform all practice and assist in the assessment of suitability of staff. We have introduced the core competencies as part of the review and appraisal process for	<b>Met</b>	It was confirmed that core competences are used to assess the suitability of new staff during the interview stage of recruitment.

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		2014 (appendix 1)		all staff.		
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### 2.2 Staffing levels are sufficient to deliver and participate in the Therapeutic Programme

<b>2.2</b>	<b>1</b>	<b>Staffing levels are sufficient to deliver and participate in the Therapeutic Programme</b>	<b>Met</b>	The Oaks always have sufficient staff on duty to care for the boys.	<b>Met</b>	This standard is met. There is a 2:1 ratio of staff to young people that allows sufficient delivery and participation in the Therapeutic Programme.
<b>2.2.1</b>	<b>1</b>	The timetable of activities is delivered consistently (For instance, core activities: community meetings, small groups, are rarely cancelled)	<b>Met</b>	Staff ratio is 2:1, this is consistent. There is a clear timetable that the community follow. This is visible for all.	<b>Met</b>	There are aspects of the weekly timetable that are followed consistently. Other more spontaneous activities are decided week-by-week in community meetings.
<b>2.2.2</b>	<b>2</b>	There are sufficient staff to support routine involvement and participation in the Therapeutic Community outside the timetable of activities, including meal times and recreation. (For instance, activities such as recreation,	<b>Met</b>	There is always sufficient staff to carry out any chosen activities by the young people. Contact visits are supported 1:1. All staff are involved in meal times, we have a range of activities supported by staff.	<b>Met</b>	The review team met a small handful of the care team on the review day, despite many attending the feedback session at the end of the day. It was also noted that the in-house therapist did not participate in the review day. The review team felt that it would have been useful for both

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		play and social time are rarely cancelled)				<p>parties to spend some time together.</p> <p>Area of Achievement: The review team particularly enjoyed hearing about how staff from the school are involved in activities outside of the normal school day. For example, the head teacher participating and supporting the boys gain their Duke of Edinburgh Awards.</p>
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### 2.3 Staff receive training related to working in a Therapeutic Community

<b>2.3</b>	<b>1</b>	<b>Staff receive training related to working in a Therapeutic Community</b>	<b>Met</b>	<p>our staff members receive internal and external training that is related to working in a therapeutic community. This includes: Introduction to Therapeutic Community training, Therapeutic Community Core Training Day 1, 2 &amp; 3. External peer review training, experiential training visiting peer reviews, TCTC training events and C of C</p>	<b>Met</b>	<p>This standard is met. The staff receive training related to working in a TC.</p>
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						training.
2.3.1 ☆	1	Staff undertake continuing professional development (of at least two days per year) relevant to working within a Therapeutic Community.	<b>Met</b>		<b>Met</b>	<p>Staff continue to receive in-house and external therapeutic training courses. We have in house Therapeutic Community Core training, Good lives Model and HSB training. Various staff have attended online external events and training with C of C and TCTC. Staff and boys have attended and presented at various conferences including TCTC annual conference. The managing director and therapy manager is on the TCTC board, the Therapy Manager is co-chair of TCTC CYP group. The managing director and therapy manager are trained as TC specialists, also involved with TCAP.</p> <p>In-house training is delivered by a mixture of SMT and the therapist. Training relates to the core competences and the therapeutic model of practice.</p> <p>CofC can confirm Amberleigh Care staff regularly participate in events and training with CofC.</p>
2.3.2 ☆	2	Staff training should be linked to Therapeutic Community core competencies	<b>Met</b>		<b>Met</b>	<p>All training is linked to the Therapeutic Community core competencies. This is evidenced on certification.</p> <p>It was confirmed on the day that therapeutic community core competencies are addressed in staff training.</p>

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2.3.3 	3	Staff receive experiential training. For example Living-Learning Workshops, group relations courses	<b>Met</b>	The young people and staff are involved in delivering and attending workshops and conferences. A number of staff have attended C of C induction training, annual conference, community meetings and events at the CofC. Staff and young people have attended the TCTC annual forum and regular TCTC CYP workshops. Staff have attended Peer review training and attended peer reviews. Marie is currently studying with the IGA. During the next cycle we are hoping to have an external living learning type program that is facilitated by an experienced professional. Although we have moved forward with this with specific staff we aim to open this up for all staff and arrange a living learning workshop that staff can experience other than what we	<b>Partly Met</b>	CofC are no longer accepting CofC annual forum, reviews and peer-reviewer training as experiential training. The review team also wondered whether all staff have access to experiential learning and workshops available.  Area of Development: Continue to work on engaging with an external living-learning programme that is facilitated by an experienced individual.
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				have learnt from in this cycle.		
<b>2.4 Staff attend group supervision</b>						
<b>2.4</b>	<b>1</b>	<b>Staff attend group supervision</b>	<b>Met</b>	All staff members attend regular group supervision led by The Oaks therapist.	<b>Met</b>	This standard is met. Staff attend group supervision.
<b>2.4.1</b> 	<b>1</b>	Group supervision is facilitated by a person with knowledge and/or experience of working in a Therapeutic Community	<b>Met</b>	Staff attend regular group supervision. This space is a facilitated by a member of the therapy team all members of the team and has some experience of working within a TC.	<b>Met</b>	The staff team attend supervision that is facilitated by the in-house therapist who has worked at the TC for some time.
<b>2.4.2</b>	<b>1</b>	Group supervision involves discussions about Service users that include reflection on theory, practice and experiential learning	<b>Met</b>	Group supervision has space to discuss and reflect on young people. Reflection is key to improve learning and outcomes.	<b>Met</b>	The in-house therapist supports the staff team to engage in discussions around interactions with the boys. The staff team noted that this is an incredibly supportive space that allows them to think beyond their initial thoughts/feelings within the moment.
<b>2.4.3</b>	<b>1</b>	Group supervision helps staff members explore their	<b>Met</b>	Staff are encouraged to reflect on their interactions with the boys	<b>Met</b>	Staff supervision is used to explore day-to-day interactions



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		interactions with Service users and staff				and other staff, and what impacts on these interactions.		with the boys and other members of staff. These spaces can be used to support one another in developing better relationships in the TC.
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2.4.4	1	Group supervision enables staff to challenge each other's perceptions of events in the Therapeutic Community and work to understand the difference between them	Met		Met	Group supervision encourages staff to express their feelings and perceptions and challenge each other's perceptions. Some staff find this easier than others.	Met	It was agreed that group supervision allows the staff team to consider one another points of view and challenge when appropriate. It was suggested that this experience is a great insight into different perspectives and relationships within the team.
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### 2.5 Staff attend a group, separate to group supervision, aimed at exploring the relationships between them as a group (commonly known as staff dynamics or sensitivity, minimum one session per month)

2.5	1	<b>Staff attend a group, separate to group supervision, aimed at exploring the relationships between them as a group (commonly known as staff dynamics or sensitivity, minimum one session per</b>	Met		Met	All staff are scheduled in to attend staff dynamics space where relationships with each other can be explored. This happens on a regular basis and timetabled in for the year ahead. This is an integral part of all staffs	Met	This standard is met. The staff team engage in a staff dynamics groups that are aimed at exploring relationships between them.
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		month)		development and engagement in the community.		
<b>2.5.1</b>	<b>1</b>	The staff dynamics or sensitivity group enables staff to reflect on the relationships between them and the impact these have on their work	<b>Met</b>	During staff dynamics staff are encouraged to reflect on the relationships that exist amongst the team and the impact this has on their work.	<b>Met</b>	The staff dynamics groups provides an excellent space for the staff team to explore their relationships and the impact these might have on their work.  Area of Achievement: The review team felt that having staff dynamics groups for individuals departments worked incredibly well and demonstrates an understanding of different needs across the staff team and service.
<b>2.5.2</b>	<b>1</b>	The staff dynamics or sensitivity group enables staff to reflect on their relationships with the wider organisation	<b>Met</b>	Staff have this space to reflect on their relationships with all employees of Amberleigh Care and external professionals.	<b>Met</b>	Criterion not discussed on the review. Score taken from the self-review.
<b>2.5.3</b>	<b>1</b>	The staff dynamics or sensitivity group should be planned and take place at a consistent time and for a	<b>Met</b>	The staff sensitivity group is planned in advance and happens approximately every 4-6 weeks and happens at the same time for	<b>Met</b>	It is unclear whether the staff dynamics group occurs once a month as advised by the overarching standard. The self-

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		consistent duration			1 hour	<p>review states dynamics occurs every 4-6 weeks.</p> <p>Consultation comments: Although we have commented the 4-6 weeks it is evident on our timetable that dynamics space occurs every month..</p> <p>The lead reviewer checked the submitted evidence showing that staff dynamics occurs once every 4 weeks. The score for this criterion has been updated to reflect this.</p>	
<b>2.5.4</b>	<b>2</b>	The staff dynamics or sensitivity group should be facilitated by an experienced group facilitator with knowledge of Therapeutic Community and/or group dynamics. The facilitator	<b>Partly Met</b>		At present the dynamics group is facilitated by the therapy manager whom is not directly involved with the day to day running of the home/school and oversee's both communities.	<b>Partly Met</b>	The staff dynamics group is facilitated by the Therapy Manager and has worked at Amberleigh Care for a period of 17 years and has experience of TCs and group dynamics. However, has line management responsibilities for one member

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		should have no clinical or line management responsibilities for any participants in the group.				of the group.
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### 2.6 There is a process for reviewing and recording staff attendance at support and training groups (i.e. staff supervision, staff dynamics, TC training etc.)

<b>2.6</b>	<b>1</b>	<b>There is a process for reviewing and recording staff attendance at support and training groups (i.e. staff supervision, staff dynamics, TC training etc.)</b>	<b>Met</b>	We have registers for all meetings that are completed and kept for records. Any concerns are discussed in community meetings and/or line supervision.	<b>Met</b>	This standard was not discussed on the review. The criteria below are scored based on the self-review.
<b>2.6.1</b> ★	<b>1</b>	There is a procedure for dealing with areas of concern raised by a review of staff attendance at support and training groups	<b>Met</b>	Attendance at group supervision and sensitivity is compulsory for all staff. Staff attendance is monitored by a register. Staff only miss these meetings if there is annual leave or exceptional circumstances.	<b>Met</b>	Criterion not discussed on the review.
<b>2.6.2</b>	<b>2</b>	There is record of any action taken following a review of	<b>Met</b>	Non-attendance of supervision or sensitivity would be discussed	<b>Met</b>	Criterion not discussed on the review.

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★		staff attendance at groups				and recorded during individual supervision. Policies and procedures would be adhered to.	
2.6.3 ★	3	There is a process to enable the staff to give feedback about the quality of staff support and training groups	<b>Met</b>		<b>Met</b>	Staff have various confidential spaces do this: line supervision, group dynamics and clinical supervision. Staff annual feedback is an avenue where staff can feedback about the quality of staff support and training groups. Evaluation forms are another feedback method for training groups.	Criterion not discussed on the review.

## Joining and Leaving

### 3.1 The Therapeutic Community is suitable for the needs of its members


3.1	1	<b>The Therapeutic Community is suitable for the needs of its members</b>	<b>Met</b>		<b>Met</b>	The Oaks referral process is specific in looking for suitable boys to join. The needs of the young person are paramount and suitability for the group at the time, There is also a process for	This standard is met.
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						all staff joining that filters suitability to the community to the best it can.
<b>3.1.1</b> 	<b>1</b>	Service users are assessed as to whether the Therapeutic Community is suitable to meet their needs prior to joining	<b>Met</b>		<b>Met</b>	This criterion is met. There is an admissions process that assesses the suitability of a new member prior to joining.
<b>3.1.2</b>	<b>2</b>	Potential new Service users are involved in their assessment as to whether the Therapeutic Community will be suitable for	<b>Met</b>		<b>Met</b>	It was confirmed that SMT will visit the young person as part of the referral process. This includes conversations about the TC and

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		their needs prior to joining				join our community and if at any stage they feel the environment is not suitable and they don't want to join then we will not proceed with the referral. The young person's feedback and views are crucial to the selection process.		their approach. If SMT feel that the young person is a good fit, they will be invited to visit in advance of joining the TC. This provides time and space for the young person to assess whether the TC is suitable.
<b>3.1.3</b>	<b>2</b>	There is a process which reflects on the current composition and needs of the Therapeutic Community prior to accepting new Service users and staff	<b>Met</b>		<b>Met</b>	The needs and composition of the community are a high priority when considering new referrals and staff. There are a number of discussions regarding where the community is at, what could impact, and what may be needed. Ensuring the 'fit' for the community is right is an essential part of our process.	<b>Met</b>	Great care and consideration is taken to reflect on the current composition and needs at the TC before accepting new members. This includes how possible new members would 'fit' with current boys and the therapeutic programme.
<b>3.2 There is an information pack for potential new Service users and staff</b>								
<b>3.2</b>	<b>1</b>	<b>There is an information pack for potential new Service users and staff</b>	<b>Met</b>		<b>Met</b>	We have an information pack for all new employees and new young people that join our community.	<b>Met</b>	This standard was not discussed on the review. Criteria scores taken from the self-review.
<b>3.2.1</b>	<b>1</b>	The information pack, as a	<b>Met</b>		<b>Met</b>	The staff receive information as	<b>Met</b>	Criterion not discussed on the

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★		minimum, should describe the Therapeutic Community ways of working, expectations of membership and confidentiality, and be understandable by all				part of the induction process which describes the therapeutic model, expectations and confidentiality of all new staff members. This is also included in initial training. The young people receive a 'Young Persons Guide' which includes brief poignant information.	review.
3.2.2	2	The information pack is reviewed regularly (minimum annually) with contributions from current Service users and staff	<b>Met</b>		<b>Met</b>	The induction for new staff is reviewed annually. The young people are actively involved in creating the young persons guide. Information is regularly reviewed.	Criterion not discussed on the review.
<b>3.3 There is a planned joining process for prospective Service users and staff</b>							
3.3	1	<b>There is a planned joining process for prospective Service users and staff</b>	<b>Met</b>		<b>Met</b>	The Oaks have a planned joining and leaving process for all members that become part of and leave the community.	This standard is met with areas of development outlined below.
3.3.1 ★	1	Service users and staff are involved in the planning and preparation for the arrival of a	<b>Met</b>		<b>Met</b>	Staff and young people are involved in the planning and preparation for a new community	Area of Development: While the boys and staff are involved in the planning and preparation for the



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		new member of the Therapeutic Community.				member. This starts when the new member of staff or young person visits the community. When somebody first visits a young person and member of staff will give them a tour. A link worker for a new young person is allocated before arrival, however if a more positive and suitable relationship is established later the link worker can change. During the next cycle we wish to work on boys roles of responsibility as the 'Welcome Committee'. We have a job description for this and we have had previous boys in this role. Due to change of boys and within the community this/these roles need to be established again to support community members joining.	arrival of new members, the community should continue to work on the boys roles with regard to the 'Welcome Committee'.
<b>3.3.2</b>	<b>3</b>	There is a process to support Service users and staff when	<b>Met</b>		<b>N/A</b>	Unplanned joining does not occur at The Oaks. It was	

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		an unplanned joining is unavoidable, which is understood by all				prior to joining us. However, there would always be a visit to the young person in the first instance. Amberleigh do not admit on emergency.		suggested that perhaps some boys may be fast tracked, however; this would still include some form of planning and informational support for the young person beforehand.
<b>3.3.3</b>	<b>1</b>	Service users and staff support new members to understand, adapt and contribute to the Therapeutic Community culture, practices, rules and boundaries	<b>Met</b>		<b>Met</b>	The community ethos at The Oaks is that all members support each other to adapt and understand the TC. This may be through mentoring, link working and generally promoting positive role models.	<b>Met</b>	It was confirmed that the whole community at the TC is involved in ensuring new boys and staff are aware of the culture, practices and rules/boundaries.
<b>3.3.4</b>	<b>3</b>	The Therapeutic Community marks the arrival of a new member of the community	<b>Met</b>		<b>Met</b>	When a young person joins the community they are welcomed in by all members during a community meeting and informal time. When a staff member joins they are also welcomed in during a community meeting and informal time. A celebratory favorite meal of their choice is made for the new arrival when they join.	<b>Met</b>	The boys' arrival into the community is marked by their favourite meal and informal time, including a number of questions relating to what football team they support. The same process appears to occur for staff, however; the action plan suggests this differs somewhat?  Area of Development: The community should work towards

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						having a similar marking of arrival into the community for the boys and staff.
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### 3.4 There is a leaving process for Service users and staff which is understood by all

<b>3.4</b>	<b>1</b>	<b>There is a leaving process for Service users and staff which is understood by all</b>	<b>Met</b>	We have a leaving process when any member of the Oaks community leaves. This is individual for each person taking into account wishes. Leaving is always discussed within the community meetings in detail.	<b>Met</b>	This standard is met. There is a leaving process for the boys and staff that is understood.
<b>3.4.1</b>	<b>1</b>	Service users and staff are involved in the planning and preparation for members leaving the Therapeutic Community.	<b>Met</b>	All community members celebrate the moving on of staff or young people (e.g., meals together, parties and leaving gifts). The extended community meetings have given the boys and staff the opportunity to explore their feelings towards a young person or staff member leaving. To celebrate the leaving of a member is usually a gathering/party to share	<b>Met</b>	In preparation for a member leaving the community, this is spoken about openly with the boys and staff in community meetings, staff meetings and keyworker sessions. These spaces are used for those leaving and those being left to express thoughts and feelings towards this and are worked through as a group, as it is understood endings can be difficult. In

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						<p>memories. When a boy leaves they take an 'Amberleigh' lifestory book with them that has been made together with key worker for all their time with us. The Oaks have experienced some boys and staff as planned leavers within the last year.</p>	<p>addition, endings are marked by a meal, celebration and often personalised gifts.</p> <p>Area of Achievement: The review team felt that the lifestory book is an excellent reflective piece of work that is contributed to by all members sat this time. Leavers can use these books to recognise their journey and to remember the TC from.</p>
<b>3.4.2</b>	<b>1</b>	Service users and staff explore and work with issues relating to endings for those leaving and for those being left	<b>Met</b>		<b>Met</b>	<p>All community members are encouraged to explore feelings and issues around endings that are occurring and have occurred. These difficult times are part of everyone's journey. Link worker sessions, therapy sessions, community meetings, staff meetings, supervisions, staff sensitivity and daily support discussions are all times that can be used to explore feelings. Over the review period, several</p>	<p>The boys and staff aim to explore and work through endings together during group meetings and keyworker sessions.</p> <p>Area of Development: It was felt that there have been some challenges and negative feelings associated with endings of staff for some of the boys. The TC is clearly working through this together, and the review team understood that this may take some time. The community</p>

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						members have left the community. The community have been able to explore how this has impacted on them.		should continue to explore these together more in keyworker sessions with specific boys, explaining why endings occurred and the importance of challenging inappropriate behaviour.
<b>3.4.3</b>	<b>1</b>	Recognition is given to the achievements and contributions of a community member during their time with the Therapeutic Community as part of the leaving process	<b>Met</b>		<b>Met</b>	Any achievements by young people or staff are recognised and celebrated by the Amberleigh community during their final get together as a community. Photos are shared and memorable events are talked about. We have an end of term ceremony in school where a number of achievements were recognised, and awards presented. We have also had leaving ceremonies for long standing members of staff, where all of the community were involved.	<b>Met</b>	Recognition is given to the boys by other members during the last community meeting together. Celebrations include pictures and reflections on memories.  Area of Achievement: The end of term ceremony for school is an excellent opportunity for the boys to recognise their achievements through awards and feedback by staff.
<b>3.4.4</b>	<b>1</b>	The community marks an individual leaving with an	<b>Met</b>		<b>Met</b>	When a young person leaves the community, an event is planned	<b>Met</b>	Endings are marked often by food (e.g, takeaways, BBQs) and

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		event or celebration				with the young person's input of wishes. A meal, party, BBQ is usually the choice and everyone who has been a part of the young person's life whilst living at Amberleigh is invited.		celebrations (e.g. parties). These are chosen by the member leaving and marked by all.
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### 3.5 There is a process to support Service users that leave or wish to leave the Therapeutic Community prematurely

<b>3.5</b>	<b>1</b>	<b>There is a process to support Service users that leave or wish to leave the Therapeutic Community prematurely</b>	<b>Met</b>		<b>Met</b>	There is a process in place if a young person wishes to leave the community earlier than planned. This rarely happens at The Oaks.	<b>Met</b>	This standard was not discussed on the review. Criteria scores taken from the self-review.
<b>3.5.1</b>	<b>1</b>	There is an expectation that a resident wishing to leave prematurely will discuss this with the Therapeutic Community	<b>Met</b>		<b>Met</b>	If a young person expresses a wish to leave early, it is dealt with by the relevant professionals. The Oaks community fully support young people with their wishes also taking into account their best interests. Young people are always encouraged to express their feelings openly and their wishes are listened to.	<b>Met</b>	Criterion not discussed on the review.
<b>3.5.2</b>	<b>1</b>	Service users and staff support	<b>Met</b>		<b>Met</b>	The ethos of Amberleigh is that all	<b>Met</b>	Criterion not discussed on the

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		each other to remain engaged with the Therapeutic Community. This includes after they have left, if required.				members are supportive of each other. To remain engaged with the community this work is active through community meetings, link worker sessions, group meetings, staff meetings, daily planning and constant support discussions. There have been continued relationships with boys that have left The Oaks through our Amberleigh Facebook group. A former resident now has a job with us as an 'Expert Peer Mentor'.	review.
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## Therapeutic Framework

### 4.1 The Therapeutic programme is overseen by appropriately qualified leadership



<b>4.1</b>	<b>1</b>	<b>The Therapeutic programme is overseen by appropriately qualified leadership</b>	<b>Met</b>	The directors and managers of Amberleigh oversee and review the therapeutic program. All leaders are qualified in therapeutic practice.	<b>Met</b>	This standard is met as per self-review.
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4.1.1 	1	The leadership can demonstrate competence in relation to therapeutic practice, especially in relation to group work	<b>Met</b>	The community has a strong multi-disciplinary leadership with care, therapy and education working closely together to ensure the effective running of the community and ensuring therapeutic practice is at the core of our work.	<b>Met</b>	As per self-review.
4.1.2 	1	The leadership has a comprehensive understanding of the Therapeutic Community Model of practice	<b>Met</b>	We have experienced TC practitioners supporting the daily running of the TC. The MD has been actively involved in the TC world for over 15 years in senior positions and is both Tavistock qualified as well as having roles in both TCTC and C of C. The Director of Care and Therapy has also worked within the Therapeutic Communities and the CofC for over 20 years. The Therapy Manager has 17 years experience in a TC, TCTC co-chair, training to become a TC specialist and currently studying Group	<b>Met</b>	Leadership has a comprehensive understanding of the model of practice.



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						Analysis with IGA.
4.1.3 ★	1	The management team (i.e. staff and community chair etc.) facilitates the delivery of a consistent approach across the Therapeutic Community, involving all staff and disciplines	<b>Met</b>		<b>Met</b>	<p>As discussed, the senior management group work collaboratively to ensure a consistent approach across the community. Over the review period we have continued to develop a greater cohesiveness within the 3 core functions of the community (therapy, care and education). The education manager also co-facilitates the extended community alongside the therapy manager and house manager.</p> <p>Area of Achievement: There is a strong triangulation approach between care, therapy and education at the TC. There is constant communication between each department to ensure a consistent approach. This includes morning meetings, debriefs and handovers after each day to discuss how the day has gone.</p> <p>The review team met a number of staff from education and care on the review, however we did not have a chance to engage with the therapist for long.</p>

### 4.2 There are structures in place to facilitate the safety of all group meetings

4.2	1	<b>There are structures in place to facilitate the safety of all group meetings</b>	<b>Met</b>	We have structures in place to facilitate the safety of all group meetings. Time boundaries and purpose of groups are established and consistent facilitators are in	<b>Met</b>	This standard is met. There are structures in place to facilitate the safety of group meetings. These include rules/boundaries in relation to time and behaviour
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						place. We have a timetable for all group meetings.		and members of staff being present to mediate discussions.
4.2.1 ★	2	Staff responsible for running group meetings have attended training in, and had experience of, delivering groups	<b>Met</b>		<b>Met</b>	Formal groups in school/therapy are delivered by qualified staff, elsewhere, this is more by experience and supervision. There is in house training to support this function (as advised by CofC). Some staff have completed and all staff have the opportunity to do the Therapeutic Child Care Degree.	<b>Met</b>	Criterion not discussed on the review. Score taken from the self-review.
4.2.2	1	Group meetings have an agreed purpose and task	<b>Met</b>		<b>Met</b>	We have a clear purpose and task to all meetings, that all members of the community understand and have agreed.	<b>Met</b>	The purpose of each group meeting was detailed on the review. The tasks for each group meeting are evident and reinforced by members of the community.
4.2.3	2	Group meetings have a consistent duration, starting and ending within limits set by Service users and staff	<b>Met</b>		<b>Met</b>	The Oaks have a clear timetable and process for meetings. There are clear time boundaries for these meetings.	<b>Met</b>	There is a consistent duration to groups with limits set by the boys and staff.

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4.2.4 	1	There are written records of groups that reflect on process and decision making	<b>Met</b>	We have written records of all meetings that occur in the community.	<b>Met</b>	Minutes are taken from every community meeting by both deputy chair and a staff member. It was great to see this responsibility being allocated to one of the boys and provides a great opportunity for them to feel responsible for notes of reference.
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### 4.3 Each resident has a plan that highlights their personal, social, therapeutic and educational needs and how they can be met through engagement with the Therapeutic Community


4.3	1	<b>Each resident has a plan that highlights their personal, social, therapeutic and educational needs and how they can be met through engagement with the Therapeutic Community</b>	<b>Met</b>	Each young person has a tailored regular personal plan review (sometimes known as a board review) that has a clear plan highlighting care, therapy and educational needs and targets.	<b>Met</b>	This standard is met through personal plan reviews.
4.3.1 	2	There are regular written updates of how engagement in the Therapeutic Community	<b>Met</b>	Quarterly reviews (personal plan reviews) occur for every young person, these reviews track and monitor individual progress and	<b>Met</b>	As per self-review, personal plan reviews include written updates on individual progress and identify targets going forward.

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		is helping the resident to address the needs identified in the therapeutic plan				identify additional needs. The reviews are chaired by the therapist and include representatives from care and education.
<b>4.3.2</b> 	<b>1</b>	Service users and relevant others are involved in all stages of reviewing and developing their therapeutic plan	<b>Met</b>		<b>Met</b>	Young people are involved in all formal review meetings but also in regular link worker sessions as well as day to day opportunities for recognising achievement and identifying small step targets. The boys attend their integrated quarterly personal plan reviews and have contributed to outlining positives and identifying targets for the next quarter.
						The boys are heavily involved in their review meetings. The review team heard examples of how the boys can provide examples of good behaviour that will result in positive consequences, such as social media independence. Relevant others (e.g, other boys, key workers, teachers and therapist) can be involved during the day-to-day at the community providing feedback when appropriate. Information collected throughout their time at the community is always brought back to the personal plan reviews that can be used to identify targets going forward.

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4.3.3 	2	The therapeutic plan is reviewed regularly using all available information. For example, attendance at groups, engagement in community life, and feedback from Service users and staff.	<b>Met</b>	usually quarterly personal plan reviews, for some individuals this is sometimes more frequent.	<b>Met</b>	As per self-review. The therapeutic plan for each individual is reviewed quarterly and includes reflections on attendance and engagement in the TC. Other members of the community can provide feedback to the individual in a community meetings before it is taken to board meetings.
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### 4.4 The Therapeutic Community has a confidentiality policy that relates directly to the work of the community.

4.4	1	<b>The Therapeutic Community has a confidentiality policy that relates directly to the work of the community.</b>	<b>Met</b>	The community have a confidentiality policy that is in place and reviewed regularly.	<b>Met</b>	This standard was not discussed on the review. Criteria scores taken from the self-review.
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4.4.1 	1	Service users and staff can describe examples of the limits of confidentiality. For example, with regard to information shared in groups	<b>Met</b>	There is a live understanding of confidentiality. It is part of our joining process, part of our groups, discussed in therapy and part of staff training. This is especially relevant to the histories of our boys and how we engage	<b>Met</b>	Criterion not discussed on the review.
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						with the wider world. There is a confidentiality policy, social media policy and positive risk taking policy that is updated and shared with the community.	
<b>4.4.2</b>	<b>2</b>	Service users and staff can describe the process that follows breaches of confidentiality	<b>Met</b>		<b>Met</b>	This is discussed during community meetings and on a daily basis and as such breaches are very rare. However, boys are aware about not gossiping about each other etc. Staff have a clear confidentiality policy in the handbook.	Criterion not discussed on the review.
<b>4.4.3</b> 	<b>2</b>	The confidentiality policy is reviewed regularly (minimum annually) with input from Service users and staff	<b>Met</b>		<b>Met</b>	The policy is reviewed annually. Any changes would be discussed with boys via community meetings if it had a direct impact on them. The boys have had discussions within the community about confidentiality and the boys awareness of this and how it feels when that is broken.	Criterion not discussed on the review.

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4.4.4 	2	Any variations from the confidentiality policy of the Therapeutic Community, such as professional requirements, must be explicitly stated	<b>Met</b>	See shared confidentiality policy for detail.	<b>Met</b>	Criterion not discussed on the review.
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### 4.5 There is a clear statement or policy relating to physical restraint which reflects the Therapeutic Community Model

4.5	1	<b>There is a clear statement or policy relating to physical restraint which reflects the Therapeutic Community Model</b>	<b>Met</b>	The Oaks have a policy in place for use of physical restraint which reflects the therapeutic community model.	<b>Met</b>	This standard was not discussed on the review. Criteria scores taken from the self-review.
4.5.1	1	Service users and staff understand when physical restraint might be used and are trained accordingly	<b>Met</b>	Boys and staff understand why physical intervention may be used. There are discussions with both staff and boys if incidents have occurred. There is a Physical Intervention policy.	<b>Met</b>	Criterion not discussed on the review.
4.5.2 	2	There are clear records of physical restraint which include reflections from	<b>Met</b>	We have a formal process in accordance with regulation and policy. All incidents are debriefed for learning. Physical intervention	<b>Met</b>	Criterion not discussed on the review.

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Standard Number	Type	STANDARD	Self-Review score	Self-Review Comment	Peer Review score	Peer Review Comment
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		Service users and staff in a community setting				is a rare occurrence in our community. We use Team Teach as an intervention model which focuses on de-escalation of the situation. The community also has the space to explore these incidents after they have occurred.	
4.5.3 ★	1	The Therapeutic Community monitors trends in physical restraint to develop an understanding of its function	<b>Met</b>		<b>Met</b>	Trends are monitored closely by the management team, internal quarterly audits, KPI's, group supervision, staff meetings, and overseen by the house manager. We have internal physical intervention trainers who also monitor these trends.	Criterion not discussed on the review.

### 4.6 There is a clear statement or policy regarding the use of social media.

4.6	1	<b>There is a clear statement or policy regarding the use of social media.</b>	<b>Met</b>		<b>Met</b>	The Oaks have a social media policy in place and regularly reviewed.	This standard is met. There is a social media policy in place.
4.6.1	3	Service users and staff can describe the rules and	<b>Met</b>		<b>Met</b>	We have a social media policy in place, all members are aware of	There have been a number of discussions around rules and



## The Review Workbook

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		boundaries surrounding social media use				<p>this. Social media use is discussed regularly in community meetings, key worker sessions, staff meetings, informal discussions and in monthly management meetings. The use of social media has improved again during the review period and individual boys continue to have access to their own devices with use of social media. This is individually risk assessed. These rules are different for each young person according to their risk and development.</p>	<p>boundaries of social media use recently at the TC. New rules have been set related to where and when certain media can be used (e.g. in the media or snug). These are individually risk assessed and spoken about with appropriate adults. It was noted that the boys can request unsupervised social media time within board meetings. It was suggested that approved requests are a result of good behaviour.</p>
<b>4.6.2</b>	<b>3</b>	Service users and staff explore the impact of social media, and openly discuss the risks involved in its use	<b>Met</b>		<b>Met</b>	<p>This is regularly discussed in community meetings, staff meetings, key worker sessions, monthly management meetings and informal discussion. We also have a positive risk taking policy.</p>	<p>Criterion not discussed on the review. Score taken from the self-review.</p>
<b>4.6.3</b>	<b>3</b>	Issues and incidents on, or regarding, social media can be raised and openly discussed in	<b>Met</b>		<b>Met</b>	<p>Issues have arisen and discussions have taken place. This is ongoing and discussed openly in various spaces.</p>	<p>Criterion not discussed on the review. Score taken from the self-review.</p>

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		the Therapeutic Community				
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### External Relations and Performance

#### 5.1 The Therapeutic Community is committed to an active and open approach to all external relationships

<b>5.1</b>	<b>1</b>	<b>The Therapeutic Community is committed to an active and open approach to all external relationships</b>	<b>Met</b>	Throughout the last cycle we have worked hard in being committed to building relationships externally. We have done this various ways.	<b>Met</b>	This standard is met.
<b>5.1.1</b>	<b>2</b>	Visitors are welcomed and Service users and staff explain the work of the Therapeutic Community	<b>Met</b>	We have a range of visitors due to the multiple agencies and professionals we engage with. Our boys are involved in providing a tour and explaining our work. The boys and some staff have also taken part in external events and presentations.	<b>Met</b>	As visitors at the TC, the review team experienced being welcomed where staff and the boys explained the work of the TC in detail.
<b>5.1.2</b>	<b>1</b>	Where there is an external professional network, they are actively encouraged to attend	<b>Met</b>	We have a formal system to involve external people in reviews - this can include a range of local authority roles, external college	<b>Met</b>	Criterion not discussed on the review. Score taken from the self-review.

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		and participate in reviews		tutors, occasional advocates etc.		
<b>5.1.3</b> ☆	<b>3</b>	Difficult relationships with the external world are reflected on and addressed by the Therapeutic Community	<b>Met</b>	The boys are able to explore and discuss their relationships with the external world in community meetings, link sessions and 1-1 work. With regards to other difficult relationships with the external world this is primarily through communication. We have monthly newsletters updating staff on internal events, external world of practice, trends, the landscape etc. We also have group and individual supervision for staff to explore these relationships.	<b>Met</b>	Criterion not discussed on the review. Score taken from the self-review.

### 5.2 The Therapeutic Community is committed to demonstrating the effectiveness of its work


<b>5.2</b>	<b>1</b>	<b>The Therapeutic Community is committed to demonstrating the effectiveness of its work</b>	<b>Met</b>	The Oaks strives in being committed to demonstrating the effectiveness of its work. We do this by quarterly review of boys progress, staff supervisions, monthly management meetings,	<b>Met</b>	This standard is met. The TC is committed to demonstrating the effectiveness of its work.
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						measures with KPI's. Boys end of therapy report show effectiveness.
<b>5.2.1</b> 	<b>1</b>	The Therapeutic Community can demonstrate that regular evaluation is used to inform and improve their work. For example, environmental measures, programme review days, research etc.	<b>Met</b>		<b>Met</b>	The TC engages with CofC reviews that are used to evaluate and inform practice. Action plans developed after each review are used to support and develop the service.

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						measuring the 'Epistemic Trust' over time within the community.	
5.2.2 ★	1	The Therapeutic Community collects individual outcome data	<b>Met</b>		<b>Met</b>	We do gather a range of tests and measure in relation to each of our young people, this is at the start of the journey and at the end. We also have sessional measures.	Individual outcome data is collected in relation to progression within the TC.
5.2.3 ★	2	There is a clear statement which defines why individual outcome data is collected	<b>Met</b>		<b>Met</b>	Individual outcomes are gathered on an individual basis. This is done through quarterly personal plan reviews within the 'Good Lives Model Framework', academic measures, monthly progress on placement plans, link worker sessions, group supervision - focussed on individuals. These outcomes are mentioned within our statement of purpose.	Criterion not discussed on the review. Score taken from the self-review.
5.2.4 ★	2	Individual Outcome data is processed in order to demonstrate the effectiveness of the work done in the	<b>Met</b>		<b>Met</b>	As part of the young persons personal plan review the therapist leads on measuring progress the young person has made. This is clearly evidenced in individual	Personal plan reviews gather individual outcome data that demonstrates the work at the Therapeutic Community.

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		Therapeutic Community				paperwork.	
5.2.5 ★	2	The Therapeutic Community collects environmental data that will help provide evidence for their effectiveness. For example, Ward Atmosphere Scale, Essences	<b>Met</b>		<b>Met</b>	This is done through our annual staff surveys. We are yet to discover an environmental data process that is suitable for our CYP Community. We have leased with other accredited communities about gathering environmental data and it has been an ongoing theme with CYP TC's for needing to explore further effective data gathering.	Criterion not discussed on the review. Score taken from the self-review.
5.2.6 ★	3	There is a written report that brings together evaluations of the Therapeutic Community. This should include learning from standards 1.5.2 and 4.3.	<b>Met</b>		<b>Met</b>	We will use the annual C of C cycle/ report, which informs a yearly action plan. Individual reports are produced for each young person outlining progress being made. Also, monthly reports are produced for the SMT meeting giving an overview of the community including attendance, reviews etc.	Criterion not discussed on the review. Score taken from the self-review.

### 5.3 The Therapeutic Community is committed to sharing good practice

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<b>5.3</b>	<b>1</b>	<b>The Therapeutic Community is committed to sharing good practice</b>	<b>Met</b>	<p>This has been an achievement over the last cycle. We have been involved in various external presentations including the C of C Annual Forum, NOTA conference, TCTC CYP group, TCTC international conference, going out (or online) on peer reviews, the therapy team have set up an external working group with other communities to share best practice and gain ideas, We have won an award with the National Diversity Awards during the last cycle and gained lots of positive publicity from this, This has been an area of achievement over the review period.</p>	<b>Met</b>	<p>This standard is met. The Oaks have engaged in a number of opportunities for sharing good practice within the area of Therapeutic Communities.</p>
<b>5.3.1</b>	<b>3</b>	<p>Service users and staff are involved in external conferences, teaching or research wherever possible</p>	<b>Met</b>	<p>Staff and boys have been involved in external online events &amp; conferences during the review period electronically also by attending and presenting workshops.</p>	<b>Met</b>	<p>It was confirmed that the boys and staff have been involved in a number of events and conferences together. It would have been good to hear more about this on the review.</p>

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5.3.2 	2	The Therapeutic Community provides training placements for students	<b>Met</b>	This opportunity is open for specific placement. During the next cycle we are hoping to look at the possibility of a university student placement in the therapy department. Our plan is to look into offering a student placement over the next review period.	<b>Met</b>	Area of Development: While not spoken about specifically on the review, the review team felt that a university student placement would be an excellent opportunity and feel that this is a good area for development.
5.3.3 	1	The Therapeutic Community takes opportunities to share its practice with others through publication of papers, attending peer-reviews, presentations at conferences and other relevant meetings	<b>Met</b>	We contribute to peer reviews with staff and lead reviewers from our service. The MD of Amberleigh Care and therapy manager is on the board of TCTC and trained as TC specialists, Therapy Manager is co-chair of TCTC CYP network group.. We have presented at the TCTC annual conference, CYP working group, presented at the NOTA annual conference, and the CofC annual conference.	<b>Met</b>	CofC can confirm staff have engaged in reviews in the 2022 – 2023 cycle. The MD and Therapy Manager are both TC Specialists and are individually involved in CofC’s Advisory Group and Therapeutic Community Accreditation Panel (TCAP). The Oaks have contributed to the CofC Annual Forum.  The review team would have liked to have heard more about presentations at the NOTA conference.



## Action Plan for 2023-2024

Please use the prepared action plan template below, which lists the standards identified for improvement and development during your peer-review. This will help to guide service improvement and will be useful for the next review cycle.

	Standard Identified for Improvement	Planned Action	Person Responsible	Due Date

## Appendices

### APPENDIX 1: Community Membership Data

The community has provided the following data for Service Users and staff for the year 1 April 2021 – 31 March 2022.

<b>Organisational Data</b>	
<b>Parent Trust / Organisation</b>	Amberleigh Care
<b>Service User Population</b>	12
<b>Age range</b>	11-18
<b>Sector</b>	CYP
<b>Overseeing regulators</b>	Ofsted
<b>Outcomes from all recent regulation inspections</b>	Outstanding - November Inspection 2022
<b>Programme Length</b>	Approx 2.5 years
<b>Length of waiting list time</b>	0
<b>Maximum Number of Places</b>	12
<b>Current number of clients</b>	12
<b>Catchment Area</b>	Shropshire
<b>Expected Length of Stay</b>	2.5 years on average
<b>Self-review process</b>	
<b>List all members involved in completing the self-review</b>	Care, Education, Therapy Team, young people.
<b>List data collection methods used</b>	Community Meetings, staff meetings, groupwork, specific workshops.
<b>List 3 specific TC related training needs you require</b>	Peer Review Training for newer care and education staff. Lead reviewer training for experienced staff.

	Core Values training
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<b>Service User Data for 1 April 2021 – 31 March 2022</b>	
<b>NB:</b> This refers to the previous annual cycle. Client data should specifically reflect the individual community, if the community is part of a larger organisation please provide an average number for the data below.	
<b>Referrals to the community</b>	
<b>Total number referred</b>	380
<b>Number of females</b>	N/A
<b>Number of males</b>	380
<b>Average age on referral</b>	14
<b>Reasons for non-acceptance</b>	No HSB, girls, extremely violent, known to abscond, not suitable for group living, drug users,
<b>Admittance to the community</b>	
<b>Total number admitted</b>	8
<b>Number of clients present on 01/04/2021 include part-day attendance</b>	11
<b>Number of females</b>	N/A
<b>Number of males</b>	11
<b>Average age on admission</b>	14
<b>Planned Leavers from the community</b>	
<b>Total number of planned leavings</b>	4
<b>Number of females</b>	0
<b>Number of males</b>	3
<b>Average age on leaving</b>	17
<b>Average length of placement (months)</b>	24
<b>Number referred on to further placement</b>	4
<b>Unplanned Leavers from the community</b>	

<b>Total number of unplanned leavings</b>	0
<b>Number of females</b>	0
<b>Number of males</b>	0
<b>Average age on unplanned leaving</b>	N/A
<b>Reasons for unplanned leaving</b>	N/A

<b>Staff Data for 1 April 2021 – 31 March 2022</b>		
<i>'Staff' includes part-time therapists, students and trainees, sessional supervisors, and regularly present consultants</i>		
	<b>Full Time Staff</b>	<b>Part Time Staff</b>
<b>Number of staff on 01-04-2021</b>	36	2
<b>Number of staff on 01-04-2022</b>	30	2
<b>Number of staff joining between 01-04-2021 &amp; 31-03-2022</b>	9	0
<b>Number of staff leaving between 01-04-2021 &amp; 31-03-2022</b>	9	0
<b>Number of recorded staff sick days between 01-04-2021 &amp; 31-03-2022</b>	Care - 284. Education - 129. Therapy - 0	Included in full time figures
<b>Average length of service in the TC</b>	3 years	3 years

## APPENDIX 2: The Core Standards and Core Values

<b>Core Standards</b>	
<b>CS1</b>	There is a clear way of working which supports the principles of the Therapeutic Community
<b>CS2</b>	Service Users and staff are aware of the culture and practices within the Therapeutic Community
<b>CS3</b>	Service Users and staff work together to review, set and maintain rules and boundaries
<b>CS4</b>	Service Users and staff take part in the day to day running of the Therapeutic Community
<b>CS5</b>	There is a structured timetable of activities that reflects the needs of Service Users and staff
<b>CS6</b>	Service Users and staff are encouraged to form a relationship with the Therapeutic Community and with each other as a significant part of community life
<b>CS7</b>	All behaviour and emotional expression is open to discussion within the Therapeutic Community
<b>CS8</b>	Everything that happens in the Therapeutic Community is treated as a learning opportunity
<b>CS9</b>	Service Users and staff share responsibility for the emotional and physical safety of each other
<b>CS10</b>	Service Users and staff are active in the personal development of each other

<b>Core Values</b>	
<b>CV 1</b>	Healthy attachment is a developmental requirement for all human beings, and should be seen as a basic human right
<b>CV 2</b>	A safe and supportive environment is required for an individual to develop, to grow, or to change
<b>CV 3</b>	People need to feel respected and valued by others to be healthy. Everybody is unique and nobody should be defined or described by their problems alone
<b>CV 4</b>	All behaviour has meaning and represents communication which deserves understanding
<b>CV 5</b>	Personal well-being arises from one's ability to develop relationships which recognise mutual need
<b>CV 6</b>	Understanding how you relate to others and how others relate to you leads to better intimate, family, social and working relationships
<b>CV 7</b>	Ability to influence one's environment and relationships is necessary for personal well-being. Being involved in decision-making is required for shared participation, responsibility, and ownership
<b>CV 8</b>	There is not always a right answer and it is often useful for individuals, groups and larger organisations to reflect rather than act immediately
<b>CV 9</b>	Positive and negative experiences are necessary for healthy development of individuals, groups and the community
<b>CV 10</b>	Each individual has responsibility to the group, and the group in turn has collective responsibility to all individuals in it

### **APPENDIX 3: What is Community of Communities?**

Community of Communities (CofC) is a standards-based quality improvement network which brings together Therapeutic Communities (TCs) in the UK and internationally. CofC is based at the Centre for Quality Improvement within the Royal College of Psychiatrists' and works in partnership with The Consortium for Therapeutic Communities (TCTC) and the Planned Environment Therapy Trust (PETT). Funding is from members' subscriptions.

Member communities are located in Health, Education, Social Care and Prison settings catering for adults and children with a range of complex needs, including:

- Personality Disorders
- Attachment Disorders
- Mental Health Problems
- Offending Behaviour
- Addictions
- Learning Disability

What do we do?

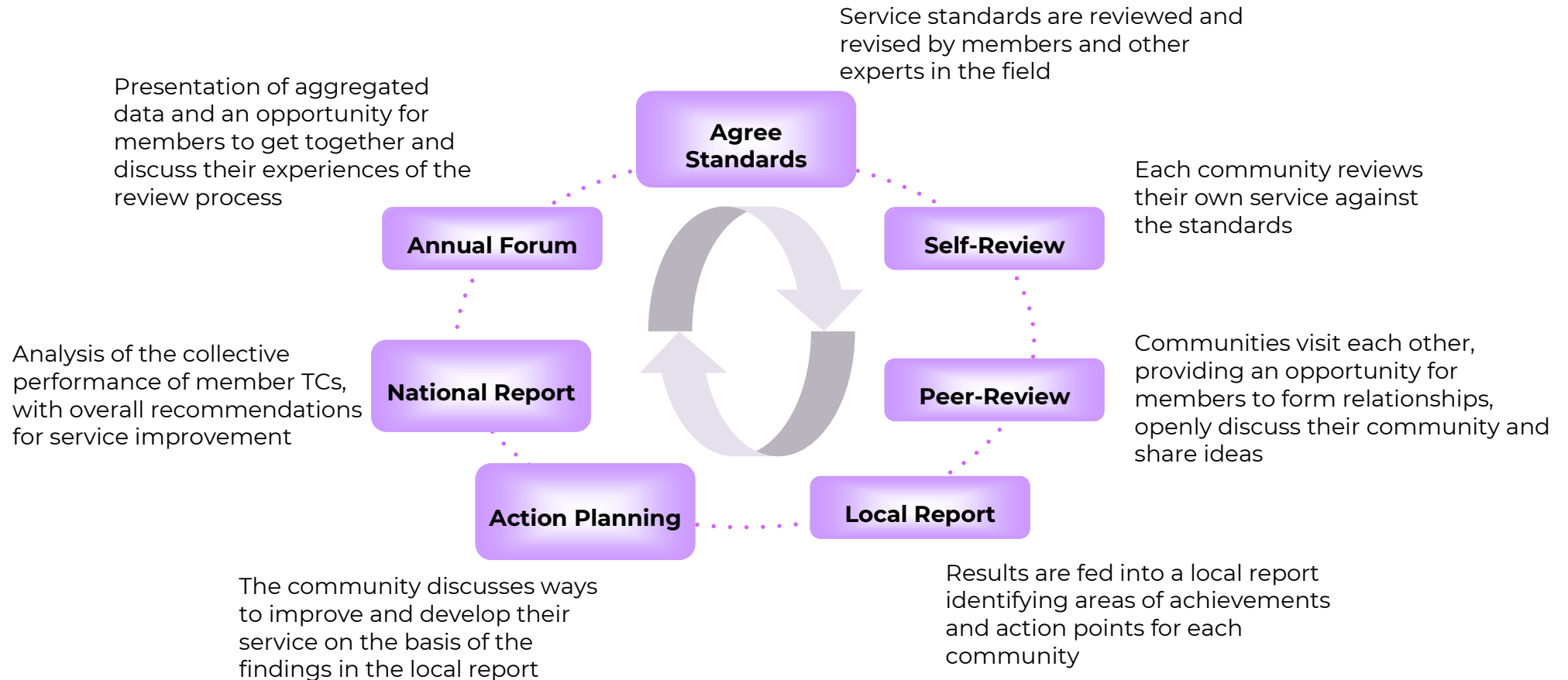
- Develop specialist service standards in an annual consultation process with members
- Manage an annual cycle of self- and peer-review processes where the emphasis is on engagement, as opposed to inspection
- Provide detailed local reports which identify action points and areas of achievement
- Publish an annual report which presents an overview of collective performance, identifies common themes and allows for benchmarking
- Host a number of events and opportunities for members to share their experiences, learn from others and gain support

What are our aims?

- Provide specialist service standards which identify and describe good TC practice and provide a democratically agreed definition of the model
- Enable therapeutic communities to engage in service evaluation and quality improvement methods and values that reflect their philosophy, specifically the belief that responsibility is best promoted through interdependence
- Develop a common language which will facilitate effective relationships with commissioners, senior managers and the wider world
- Provide a strong network of supportive relationships
- Promote best practice through shared learning and developing external links

## APPENDIX 4: The Annual Cycle

CofC uses an annual standards-based review process to enable TCs to demonstrate and improve the quality of their work. The methods and values underpinning the project mirror the central philosophy of TCs. Staff, client members and ex-client members of participating communities are fully involved at each stage of the process.





## **APPENDIX 5: Acknowledgments**

The Community of Communities would like to thank all those involved in organising, attending and leading reviews and in particular to thank staff and client members of the host community and members of the peer-review team. We are also grateful for the hard work and support of the Advisory and Reference Groups.

## **APPENDIX 6: Community of Communities Team**

### **Contact Details**

cofc@rcpsych.ac.uk

The Royal College of Psychiatrists'

Centre for Quality Improvement

21 Prescot Street

London E1 8BB

Telephone: 020 7235 2351

Email: [cofc@rcpsych.ac.uk](mailto:cofc@rcpsych.ac.uk)

<https://www.rcpsych.ac.uk/cofc>



**CofC**  
THE COMMUNITY  
OF COMMUNITIES

The Royal College of Psychiatrists'  
Centre for Quality Improvement  
21 Prescot Street  
London E1 8BB  
Telephone: 020 7235 2351  
<https://www.rcpsych.ac.uk/cofc>



The Consortium for Therapeutic Communities  
2A Parkyn Road  
Nottingham  
NG5 6BG  
Tel/Fax: 01242 620077  
<http://www.therapeuticcommunities.org>

# C of C

Royal College of Psychiatrists  
21 Prescott Street  
London  
E1 8BB

[www.rcpsych.ac.uk/cofc](http://www.rcpsych.ac.uk/cofc)  
[cofc@rcpsych.ac.uk](mailto:cofc@rcpsych.ac.uk)