



# Oasis Restore Assessment and Formulation Policy

January 2024

<u>Version</u>	<u>Signed and agreed by</u>	<u>Date</u>	<u>Review by</u>
1.	Responsible Individual, Registered Manager and Directors	22 <sup>nd</sup> January 2024	January 2025 (or when needed)

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## Purpose

The purpose of this document is to set out the founding principles and process around assessing and formulating the needs, potential and aspirations of each child who comes to Oasis Restore. This process is unique to Restore and designed specifically in relation to what we know about the children, the context, and the goals and intentions of the setting. Accordingly, our choice of assessments is closely tied to our Outcomes Framework (see Fig 4). A glossary of terms is found at the end, including definitions of key documents.

## Definitions

We believe that all staff should be empowered to support the needs, potential and aspirations of all children at Restore, informed by data gathered in both formal and informal ways. The assessment and formulation policy describes the process of data collection and how it is used to inform the decisions made around each child. The purpose of assessment is to gain the fullest possible understanding of the child, in the most sensitive, appropriate, and timely ways, in order to be able to help address their needs and to enable them to access the right support at Restore and beyond.

*We define assessment as the process of developing a deep and dynamic understanding of a child by means of a variety of forms of information-gathering that examine and evaluate different aspects of their emotional, social, cognitive, academic and personal development.*

Assessment is a dynamic process that reflects the child's progress and changes over their time with us. We recognise that it is highly contextual and that it is never finished or a static judgement. Gathering and presenting the results of assessments across these domains, over the time of a child's stay at Restore, enables him or her to see a developmental process, and for staff, family, and others in the network to track the impact of events, learning or therapeutic interventions.

The Restore approach to assessment involves carefully and compassionately gathering detailed and relevant information with and about a given child, in multiple forms, initially and over the period of their stay with us, and beyond, as far as possible. This includes both formal and informal information-gathering, via conversation, observation, psychometric testing, academic aptitude tests, educational tasks, collecting and synthesising reports from the past, and interviewing people who know the child well. The child's voice and investment in this process is crucial, and assessment needs to be timed and offered in a way that is sensitive to the child's current state and understanding.



Ongoing academic assessment is used to identify gaps in knowledge and understanding that teachers can promptly address, adapting their lessons using a deep understanding of the related pedagogy. Formative assessment, including knowledge quizzing and checking for understanding of the key taught concepts, will take place in every lesson. Students will be given immediate feedback and formal reporting will not take place. Graded summative assessments will occur less frequently to assess cumulative understanding and vary by subject in the form of a written assignment or test. These will be recorded on the school calendar.

The output of assessment is then brought to a process of formulation, whereby the child and those working with them (the Core Team, key additional professionals, and family where possible) make sense of what is going on and develop a shared understanding that points towards potential plans, which are then recorded in the child's Restore Plan. Subsequent mid-termly formulations integrate and make sense of ongoing assessment data with the child, their family and key professional links.



*Fig 1: The Core Team*

The Core Team (see Restore Framework for more details) comprises the staff who are designated as those working most closely with the child. This team is intended to remain stable throughout the key stages of the child's time at the school, developing a deep and enduring relationship with the child and providing containment, security and continuity. This reflects our recognition of the transformative power of attachment relationships and the sense of belonging.

The Core Team is the forum through which information about the child is managed, held and interpreted, with the help of other parts of the staff team and other functions in the school and beyond it (e.g. Reflective Practice, consultations with other staff, meetings with family members). Initial assessments may be done mainly by staff working in the Welcome Flat rather than the child's eventual Core Team, though some integration of these will be possible and desirable.

This policy outlines the process of assessment and the output of Core Team meetings that will take place over a child's journey at Restore. These meetings are the principal forum through which assessments and formulations are assimilated and developed, and plans put in place.

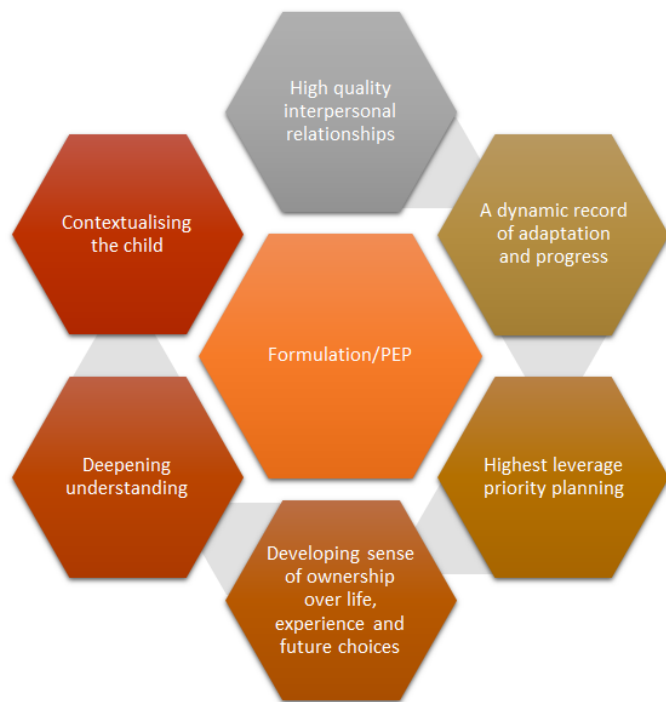


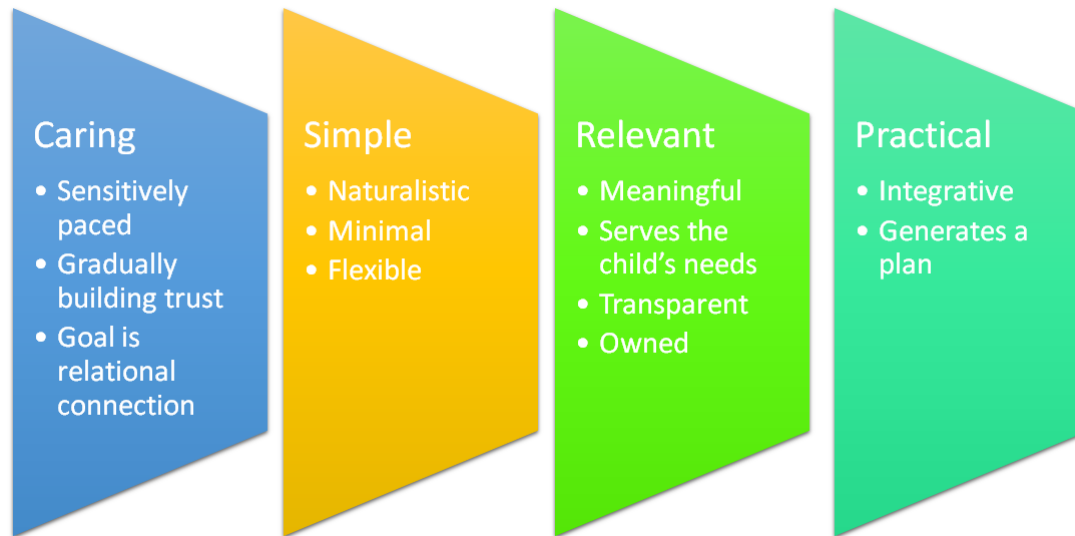
Fig 2: Key functions of Formulation

**Formulation (including the PEP - Personal Education Plan)** refers to a process of discussion and the collaborative construction of a unique narrative explanation that links the child’s experiences and the information that is known about him or her. This narrative makes sense of these various forms of information, bringing them together in a coherent way that helps guide the child and those around them to find and generate ways in which their needs can best be met; this includes shaping how staff approach and work with them, their family, and what their timetable looks like.

The RESTORE principles underlie our approach to assessment and formulation:

- Geared towards developing safe, enduring **Relationships**
- **Empowering** through the child being fully involved in and having choice in the process, and with access to information about his or her progress
- **Safety** through being known and understood in a therapeutic manner
- Undertaken in a manner that is **Trauma-responsive** and promotes the integrity of the child
- Promotes **Ownership** through reflecting the child’s aspirations, capabilities and needs and uses language they have used and understand
- Enables the provision of social, emotional, educational, and other opportunities that have a **Restorative** potential for each child
- Based in a culture of **Enquiry**, honouring the dynamic process of change and curiosity about what is happening at any given moment.

As applied to assessment and formulation, these principles mean that this process must be undertaken in a caring way, as simply and naturalistically as possible, must feel relevant to the child and must have a practical application.



*Fig 3:* Key considerations in the assessment process

### The Assessment and Formulation Process

Our assessment process follows the metaphor of a journey, acknowledging the child's process in coming to a new place and embarking on a process of change that leads to a destination for which they feel prepared and equipped. In literal terms this tracks the process of collecting information that follows progress and informs the Oasis Passport, which should document the child's achievements. The assessment process is linked to our outcome areas for children (see Fig 4).

The process described in the table below needs to be understood as a guide, rather than a prescription, as we understand that – beyond the statutory responsibilities for the CHAT – this will need to be undertaken at a pace and in a manner that suits each child and prioritises developing safety and relational connection.

Given that the primary aim of assessment is to generate useful information towards promoting positive outcomes, it is only useful in so far as it is responsive to the child’s needs and capacities, and enhances the relationships we are developing with the child, their family and network, and the care offer.



we

Phase	Time point	Measure/Document	Who completes (and where)?	How long does it take?	Information-sharing	Responsibility
<i>NB: All stated timings, except those regarding statutory assessments, are flexible and dependent on numerous factors including the child’s readiness and consent.</i>						
Welcome	Days before court	Pre-sentencing Report Early notification received	YOT	N/A	Towards Restore Early Days Assessment (RED-A)	Restore Networker, shared with SLT and Registered Manager
	On the day of court	Custody module, including post court section of Asset Plus Referral Local Authority front door	YOT sends to YCS Placements through Connectivity Placements Service YCS Placements team	N/A	Towards RED-A	Restore Networker



Phase	Time point	Measure/Document	Who completes (and where)?	How long does it take?	Information-sharing	Responsibility
		<p>Specific information re risks and needs of the child</p> <p>Review of Restore checklist of statutory information required prior to accepting child placement</p>	Restore Networker	N/A		
	Prior to child's arrival	<p><b>Documents required:</b></p> <p>Sentencing Reports:</p> <ul style="list-style-type: none"> <li>• ASSET-PLUS</li> <li>• Pre &amp; Post-sentencing Report</li> <li>• Child and Family Assessment</li> <li>• EHCP (where applicable)</li> </ul> <p><b>From Pre &amp; Post Sentencing Report &amp; ASSET</b></p> <p>School report</p> <ul style="list-style-type: none"> <li>• Attendance</li> <li>• Exclusion</li> <li>• Existing qualifications</li> <li>• Current progress scores</li> <li>• Academic support plans</li> <li>• KS2 data</li> <li>• SEND information</li> <li>• EHCP</li> <li>• PEP (if LAC)</li> </ul> <p>Health records:</p> <ul style="list-style-type: none"> <li>• GP / Medical information</li> </ul>	<p>Youth Justice Application Framework (YJAF).</p> <p>The Youth Offending Team</p> <p>Placements team</p> <p>Children's services</p> <p>Placements team/ YOT (National Standard)</p> <p>Placements team/ LA Children's Services</p> <p>Virtual Head. Attendance/ Exclusion Service</p> <p>SEND Lead</p>			

Phase	Time point	Measure/Document	Who completes (and where)?	How long does it take?	Information-sharing	Responsibility
		<ul style="list-style-type: none"> <li>• Neurodevelopmental assessments/ plans (including eating disorders)</li> <li>• Mental Health reports/assessments/plans</li> <li>• Substance misuse</li> <li>• Current medication and prescriptions</li> <li>• Family and child's medical history from parents/carers where possible</li> </ul> <p>Community safety Police report (PNC) Community safety partnership reports (example – PREVENT) Threat to life indicators Children's Social Care – contextual safeguarding lead/team (where possible)</p> <p>Include signed consent forms (parents/ carers/ director of children's services)</p> <p>Personal information: Medication and signed consent form.</p>	Placements team/ Child's previous school			
	On arrival/Day 1	Orientation	Welcome Flat staff, e.g. Restore	30 mins +	Towards RED-A	Restore Networker/Welcome Flat staff

Phase	Time point	Measure/Document	Who completes (and where)?	How long does it take?	Information-sharing	Responsibility
		CHAT 1	Networker/Restore Practitioner  Primary care nurse, in Welcome Flat Health Room	30 mins +	Recorded on NHS notes platform: key relevant information shared to RED-A as appropriate	Primary Care nurse
		CHAT 2	Primary care nurse, in Welcome Flat Health Room	30 mins +	Recorded on NHS notes platform: key relevant information added to RED-A as appropriate  RED-A shared with all staff via Bromcom and handovers	Primary Care Nurse
	Day 2-3	CHAT 3	Mental health/substance misuse specialist, in Welcome Flat Health Room	30 mins +	Recorded on NHS notes platform: key relevant information added to RED-A as appropriate	Healthcare team

Phase	Time point	Measure/Document	Who completes (and where)?	How long does it take?	Information-sharing	Responsibility
		CHAT 4	Mental health specialist, B6 or above, in Welcome Flat Health Room	1 hour +	Recorded on NHS notes platform: key relevant information added to RED-A as appropriate	Healthcare team
		CHAT 5	Mental health/ neurodevelopmental specialist/SALT, in Welcome Flat	30 mins +	Recorded on NHS notes platform: key relevant information shared to RED-A as appropriate	Healthcare team
<b>Day 4: Initial Formulation Meeting, drawing on all information gathered towards the RED-A. May be preceded by Professionals/Family Meeting.</b>						
Induction	Day 4-7	Adolescent Sensory Profile	Occupational therapist or other trained professional, in Welcome Flat	1 hour or more	Recorded on NHS notes platform: key relevant information shared to RED-A as appropriate	Healthcare team
		Dyslexia Screening Test	SENCO, Educational psychologist	15-20 minutes	Recorded on Bromcom: key relevant information shared to RED-	SENCO

Phase	Time point	Measure/Document	Who completes (and where)?	How long does it take?	Information-sharing	Responsibility
					A as appropriate	
		SALT assessments	Speech and Language Therapist	1-2 hours	Recorded on NHS notes platform: key relevant information shared to RED-A as appropriate	Healthcare team
		CAT4 test completion x 3 (separate with break if required)	Designated HLTA, in Welcome unit using laptop or Discovery I/U ICT or Library	Up to 3 hours	Recorded on Bromcom; held by SENCO and shared to RED-A	Designated HLTA
		Progress testing (English and Maths)	<b>Leads for English and Maths</b>	2-3 hours	Recorded on Bromcom, shared to RED-A	Teaching staff
	Days 7-28	Further psychometric testing, including baseline and specialised testing around particular presentations  Assessment for therapies  e.g. Beck Youth Inventories, Trauma Symptom Checklist for Children, Psychotherapy assessment	Welcome Flat Therapist, SENCO or other healthcare professionals	3 hours +	Recorded on NHS notes platform or Bromcom (if appropriate), shared to Restore Assessment (RA)	Healthcare team

Phase	Time point	Measure/Document	Who completes (and where)?	How long does it take?	Information-sharing	Responsibility
		Risk assessment and safety planning				
<b>By Day 28: Formulation Review takes place, drawing together all assessment data and generating Restore Plan (includes Formulation and Timetable).</b>						
Journey	Mid-termly	Selected repeated measures (see Table 2, below)	Home flat, Discovery-i or Discovery-u as appropriate	1 hour	Recorded on NHS notes platform, Bromcom and integrated by Core Team into ongoing Formulations and Restore Plan, and Restore Passport as appropriate.	Restore Networker coordinates designated staff as appropriate.
	Weekly or monthly	Core Team Formulation Review and discussion of emerging information and assessments.	Home flat	1-2 hours	Recorded on Core Team Template on Bromcom/MIS/S ystm1	Lead RP/other Core Team members
<b>6/8-weekly (mid-termly): Formulation Review takes place with Core Team, drawing on results of mid-termly assessments. These will be scheduled to include Resettlement Reviews with professionals from the wider network.</b>						

Phase	Time point	Measure/Document	Who completes (and where)?	How long does it take?	Information-sharing	Responsibility
Journey's end	Pre-release, prior to final Formulation	Baseline measures repeated (see Table 2, below)  OR Leavers Interview	Home flat, Discovery-i or Discovery-u as appropriate	Up to 2 hours	Recorded on NHS notes platform, Bromcom and integrated by Core Team into Restore Summary and Oasis Restore Passport	Restore Networker coordinates designated staff as appropriate
<p><b>During the week prior to release: Final Formulation and Resettlement Review, drawing on accumulated assessment data and planning information, celebrating the child's progress and achievements. Generates final Restore Summary for handover to external partners, and final Restore Passport for the child.</b></p>						
Beyond Restore	3 months, 6 months, 1 year, 18 months, 3 years post-release	OR Alumni Interview	TBA	Up to 2 hours	Secure data storage	Designated Restore staff /researcher/ healthcare (TBA)

*Table 1: Timeline of phases of a child's journey through Restore, including assessments and formulation reviews*

## Ongoing assessment

To provide a dynamic and responsive picture of the child's progress at Restore, we aim to repeat a set of assessments every 6-8 weeks, or mid-termly. This may include more frequent or intermittent measures (such as attainment tests) as well as a standard set of measures. Some of these (e.g. the BERRI) are clinician- or staff-rated and involve no work on the part of the child. Additional assessments (for example, the ADOS and ADI for children for whom there are concerns about an autistic spectrum condition) may also be undertaken. The assessments chosen reflect the domains of our Outcomes Framework.



Fig 4: Domains of the Oasis Restore Outcomes Framework, aligned with the assessment process



The ongoing set of assessments, organised here by these domains of our Outcomes Framework, may include:

<b>Outcome domain</b>	<b>Developing capacities</b>	<b>Baseline measures (within the Welcome and Induction phases)</b>	<b>Ongoing measures (every 8 weeks)</b>	<b>Pre-release/transfer measures</b>	<b>Follow-up post-release/transfer measures</b>
Improved social, emotional and cognitive development	Communication	BERRI	BERRI	BERRI	OR Alumni Interview
	Confidence and agency	Flourishing Life Questionnaire (FLQ)	FLQ	FLQ	BERRI
	Creativity/discovery	Child/Adult Attachment Interview	OR Development Questionnaire	OR Leavers' Interview	
	Managing feelings	Staff observation and self-report via the OR Development Questionnaire			
	Planning/problem-solving	CHAT 4			
	Building and maintaining relationships	Fagus developmental profile			
	Debate/discuss/form opinion and reasoned arguments				
Understanding of social norms and contextual rules					
Improved quality of holistic health and wellbeing	Neurodevelopment	Beck Youth Inventories	FLQ	OR Leavers' Interview	OR Alumni Interview
	Mental wellbeing	Sensory Profile	OR Development Questionnaire	Trauma Symptom Checklist for Children	
	Physical wellbeing	Dyslexia Screening Test		Beck Youth Inventories	
	Nutrition and diet	SALT Screening tests	Progress Tests	SALT update assessment	
	Substance misuse	Staff observation and self-report via the OR Development Questionnaire		AIM3 if indicated	
	Sexual health				

Outcome domain	Developing capacities	Baseline measures (within the Welcome and Induction phases)	Ongoing measures (every 8 weeks)	Pre-release/transfer measures	Follow-up post-release/transfer measures
	Public Health Personal Care	CHAT 2,3,4 and 5  Trauma Symptom Checklist for Children  Conners/ADOS/ADI if indicated  AIM3 if indicated			
Improved quality of care, safety and inclusion	Risk to self Risk to others Relationships Exploitation Safeguarding Care Equality and diversity	Staff observation and self-report via the OR Development Questionnaire  Risk assessment  Social GRACES  FLQ  CHAT 1  Inventory of Parent and Peer Attachment	OR Development Questionnaire  Inventory of Parent and Peer Attachment	OR Leavers' Interview	OR Alumni Interview  BERRI
Improved capacity to discover, enjoy and achieve	Progress in education Engagement in enrichment/co-curricular activity Volunteering Academic progress Independent skills for life Spiritual development Social and cultural capital	Fagus Developmental Profile  Adaptive Behaviour Assessment System – 3  Progress Tests  Staff and self-report via the OR Development Questionnaire  Goal-Based Outcome Scales (GBOS)	Educational attainment  OR Development Questionnaire  GBOS  Engagement in youth work activities (contact/participation/accreditation) Progress Tests	Adaptive Behaviour Assessment System – 3  Qualifications and work experience achieved  OR Leavers' Interview  GBOS  Progress Tests	OR Alumni Interview  GBOS

Outcome domain	Developing capacities	Baseline measures (within the Welcome and Induction phases)	Ongoing measures (every 8 weeks)	Pre-release/transfer measures	Follow-up post-release/transfer measures
	PSHCE				

Table 2: Example toolkits for assessment in each of the outcome domains

The data from the ongoing set of assessments will be analysed and evaluated mid-termly or as the data is collected by:

- Data analysis staff employed by Restore and/or the NHS-commissioned healthcare team
- Assistant Psychologists employed within the healthcare team
- Restore Networkers
- Members of the Core Team
- Self-report on the child's media device
- Subject specialist teaching staff
- Heads of Departments
- Deputy Director of Learning and Enrichment
- Senior Leadership Team
- Directors

## Formulation: making sense of and using Assessment

Formulations bring the data from assessment together in a coherent way and provide a forum for developing a plan with the child and those in his or her network. This iterative process is described in Fig 5, below:

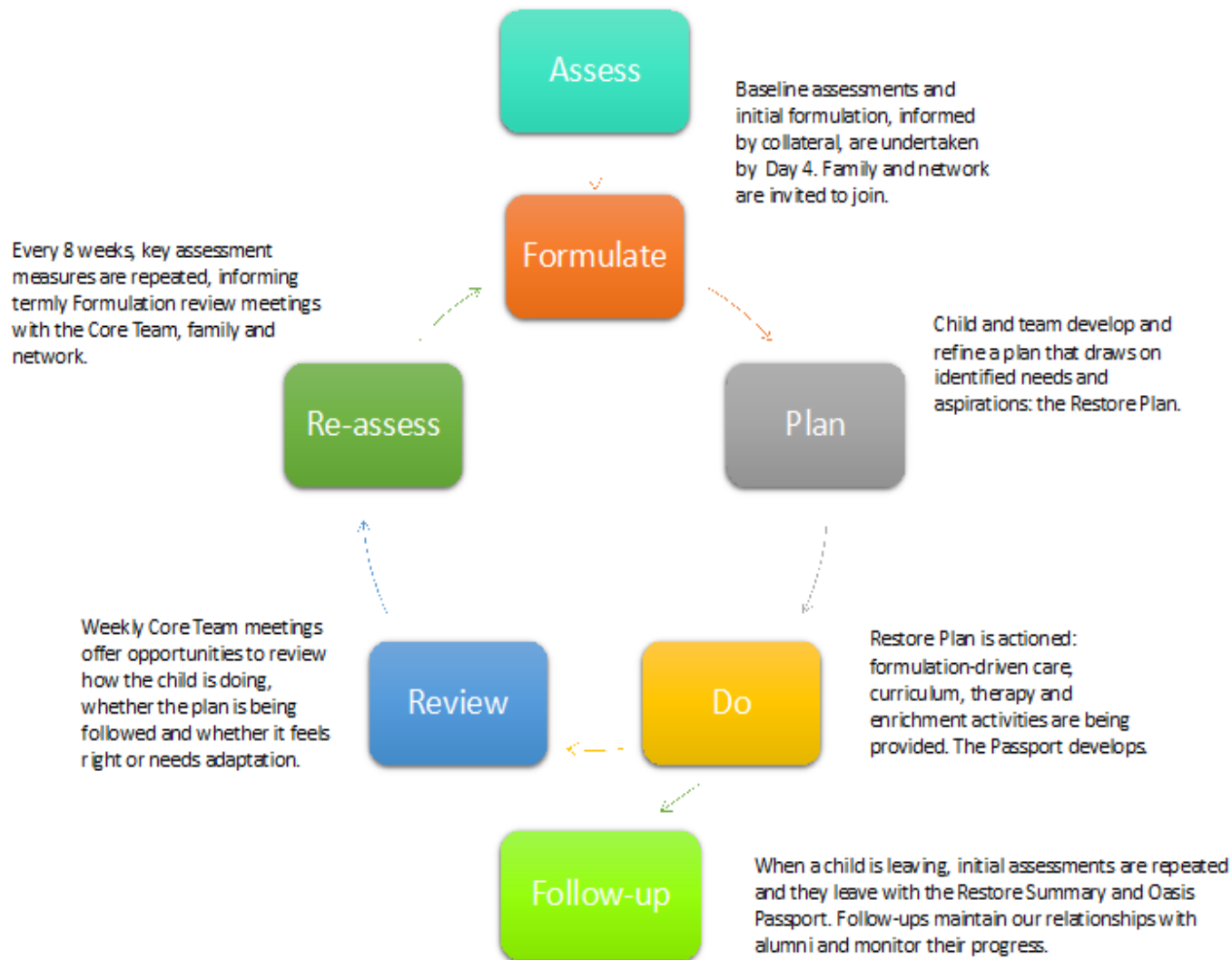



Fig 5: The iterative process of assessment and formulation at Oasis Restore

## Initial Formulation Meeting

The initial formulation meeting takes place **within four days of the child's arrival at Restore**.

The initial Formulation meeting should cover:



Start where the  
child is

- Recent history and the circumstances in which the child has come to Restore (e.g. offence/alleged offence, court or police process prior to admission, life circumstances leading up to the offence)
- Settling in at Restore and their progress in the Welcome Flat
- Key supportive relationships
- Future aspirations, strengths and abilities; educational history and engagement (e.g. what inspires and motivates the child, what do they enjoy doing already?)
- Risk-related information (e.g. related to the offence or past offending; risk to self or others; risk from others; safeguarding concerns; mixing concerns; mental health or neurodiversity issues).
- Any other relevant and useful information from the Restore Assessment process or regarding past assessments that can be shared (e.g. EHCP, Pre-Sentencing Report, CAMHS reports etc.).

The key output of this meeting is the **Restore Early Days Assessment**, towards the development of the **Restore Plan** which outlines the timetable of the child for the following fortnight and includes a narrative formulation and a set of recommendations for how the staff and the child will work together.

It should be co-chaired by a senior member of Restore Staff, and will include induction Restore Practitioner, Health Practitioner/s, designated HLTA or SENDCo, the Restore Networker and the child him or herself.

The Core Team or those Restore staff attending this meeting will meet afterwards to debrief, discuss any issues and actions arising, and allocate tasks. The meeting may be preceded by a meeting with the child's family and with external professionals from the child's network.

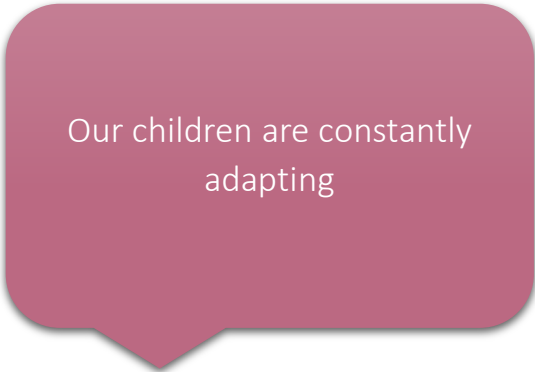
Notes from the meeting are then recorded on Bromcom and used to develop the the child's developing formulation, within the Restore Plan. The Lead Restore Practitioner or another designated member of the Core Team is responsible for providing a copy of an accessible version of the Restore Plan that is safe to be shared with the child, and meeting with them subsequently to go through this and make any changes.

## Subsequent Formulation Meetings

During the Welcome/Induction phase (by Week 4), a Formulation Review meeting is held to bring together what is known about the child from the Restore Assessment and other collateral information, and to share this with the professional network towards making a plan with the child for his or her stay at Restore. This should include educational and vocational targets and aspirations, health and wellbeing support, and information that informs the way in which the whole staff team understands, approaches and looks after the child. These are then included in the child's Oasis Restore Passport.

The formulation is a live document that changes with the child, incorporating new information about his or her progress, adjustment, goals and experiences at Restore. A similar process will be followed as above:

1. Meet with the child informally in advance to discuss the safest and most comfortable format for the Formulation meeting (e.g. location, attendance, timing, any sensitivities in the discussion).
2. Core Team or other involved Restore Staff meet in advance.
3. The child joins the meeting and co-chairs.
4. Meeting principles are adhered to: sensitivity, curiosity, empathy, playfulness and acceptance of the child's experience, as well as accountability, goal oriented-ness, responsiveness and the overarching aim of developing deeper relational connection and supporting aspirations.
5. Discussion includes exploration of the child's experience at Restore, and any new information or developments in their life, achievements, legal situation etc.
6. Staff debrief and task allocation
7. Designated member of staff meets with the child to review a child-friendly written Formulation and to ensure they have access to it.
8. Designated staff member updates Oasis Restore Passport, Bromcom and handover where appropriate.

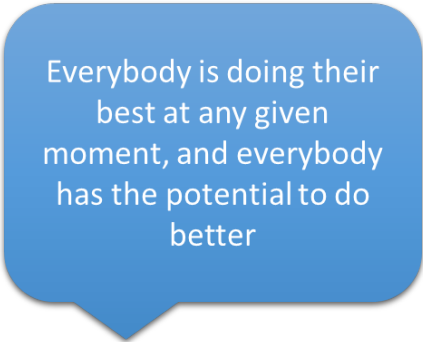


Our children are constantly  
adapting

Children will then have a mid-termly (6/8-week) formulation review with their Core Team (and potentially with their family members and external professionals if appropriate), to discuss their progress, relationships and development, and explore the qualitative report completed by their subject teachers, in the context of their wider formulation. This will include written information about their engagement in their learning pathway, targets for next term and a key area of focus in preparation for next term. This will be integrated with 12-weekly Resettlement Reviews in line with statutory requirements.

Formulation reviews are intended to provide containment to the child and the network, ensuring that there is a good level of understanding of the child, in context, and that plans are working well and are appropriate. The output of the Formulation Review is an updated narrative formulation and a Restore Plan that is adapted to current circumstances. The Restore Plan encompasses the Care Plan function of healthcare as well as the timetable and wider contextual goals for and around the child.

Target-setting, in the context of formulation and re-formulation is determined by the iterative process, as pictured in Fig 3. The aim is that every child can make progress, whether academic, skills-based, personally, relationally or in any other sense. Children will be at Oasis Restore for varying course lengths, so academic and other target-setting must be understood as part of a flexible and holistic approach and specific areas prioritised accordingly.



Everybody is doing their best at any given moment, and everybody has the potential to do better

In addition, a quantitative report using the summative data on student progress against their personal starting points, considering their KS2 data, will be shared twice yearly with students and parents. This will contribute towards the Final Formulation Review, recognising the students for their personal progress and achievements.

This ongoing record will be shared between the child and his or her Core Team, and with the wider system as far as feels useful, necessary and respectful of confidentiality. Aggregate data will be used to report both to external authorities (e.g. Ofsted, CQC) as well as within Oasis Restore, as a vital form of quality assurance and internal monitoring (see Appendix 9, Quality Assurance).

## Beyond Restore

As the child prepares to leave Oasis Restore, whether ending their period in secure care or transferring to the adult estate, the Core Team, with the child, is responsible for drawing together the whole story and process of the child's experience at the school, in the **Restore Summary**. This document should be in a form that can be shared with external agencies, as needed. It should reflect the contents of the child's Restore Passport, as well as providing further information about the whole range of assessment and work done with them.

This information will be passed onto any further or returning Education setting through a meeting with the designated teacher/ SLT to ensure smoother reintegration, contextualised within their wider Formulation. It will inform their CV and route into apprenticeship/training or employment.

The series of assessments that are completed in the final phase include some that enable a **direct comparison** between the situation at the start of the child's journey within Restore, and the situation at its end. They include the **Oasis Restore Leavers' Interview**, undertaken with a member of staff employed either in a research capacity or uninvolved with the child's care, in order to enable the child to speak with as much freedom as possible about their experiences at the school and their impact.

For those children who leave Restore following acquittal while on remand, or having completed a brief period at Restore on a short sentence or having breached licence conditions, the Restore Summary and Leavers' Interview will necessarily take a different form; likely **shorter and more specific**, given the different scope of the work they will have done.

A **final Formulation Review, involving a celebration** of the child's work at the school with families and other key individuals in their system, will be held in their last week.



Relentless love

Once a child has become an **alumnus** of Restore, having moved into the next stage of their journey beyond the school, we expect to keep in touch with them on both a formal and an informal level, remaining involved with developments in their lives via our work the Navigators in the Restore Network. We expect to be able to undertake **regular follow-up meetings** with the child both to offer a sense of continuity to the relationships they formed with us, and, where possible, to complete updates on the key measures of progress we define, in relation to our outcomes framework. These will be contained within the **Oasis Restore Alumni Interview**.

### Cautionary notes

Most children will not feel comfortable sharing personal life story information, or information relating to criminal activity or the index offence, with a group of professionals. It is not useful or therapeutic to expect them to do this and care should be taken to accept the level of information they are prepared to give and to appreciate the reasons they may have for this, or to change the format of the Formulation and associated meetings to attend to this. The professional and family network may need to meet separately in some cases, but efforts should always be made to involve the child as much as he or she



wishes. Information divulged in separate contexts needs to be shared in a sensitive and careful way, mindful of the child's right to confidentiality and privacy, balanced with the need for staff to understand their unique context, challenges and needs.

## Meetings

Good communication happens in person as well as via recorded information on our online systems. Meetings strengthen relationships and help the work remain coherent. Handovers and staff meetings are key in assimilating and then disseminating learning from Formulations and Formulation Reviews

Handovers during the assessment phase are crucial in disseminating information from and to the staff team working on the Welcome Flat, and beyond, across the wider Restore team. These take place at the designated handover times with the wider staff group and written records are updated on Bromcom at the end of every shift.

New information from assessments, that may alter or enhance our approach to a given child, needs to be communicated into the wider staff handover by the Lead Restore Practitioner or designated other. The wider team also need to hear about how Formulations have gone: how families and children have been, and how they have experienced working with our staff, and how the Formulation has developed. Staff will be notified when Formulations have been updated or changed, and directed to read these on Bromcom.

Staff meetings of any kind will incorporate access to and discussion of the Formulations of the children being discussed.

## Staff training

Staff are trained to understand and use the Restore Assessment and the Formulation process in their induction period. From there on, they continue to learn via an apprenticeship model, observing and joining more experienced staff in the various parts of this process. In the longer term, knowledge, skills and practice are enhanced through supervision, reflective practice, and further training. Practice is monitored via the quality assurance process described below and taken up in clinical and management supervision.

## Assessment competencies and skills

All staff should be able to:

- explain the Restore assessment process to a child, family member or external professional
- understand the rationale for assessment at Restore, and how it reflects the ethos and principles of the school
- understand the Restore outcomes framework and the assessments that relate to each domain
- be familiar with all of the assessments used, their rationale and value
- understand how all of the assessments are scored and interpreted
- understand the strengths and limitations of different forms of data collection
- apply the Restore principles and the 9 Habits to their interactions around the assessment process
- make reasoned and sensitive decisions about the timing and appropriateness of the assessment process
- assist and support a child in answering any of the self-report questionnaires (e.g. explaining the meaning of words, helping them understand what is being asked, responding to the emotional impact of any of the questions)
- upload and record assessment results and data on to the child's electronic record
- follow the appropriate safeguarding protocol where assessments raise specific concerns about a child or others
- contribute to discussions about a child's wellbeing, adjustment and progress in any of the domains of the outcomes framework
- treat the results of assessment sensitively, holding in mind the child's right to privacy
- use assessment data, where appropriate, to encourage and reinforce the child's progress and self-esteem
- generate ideas about potential learning interventions, support, treatment strategies or forms of interaction that may address issues highlighted by the assessments
- use supervision and reflective practice and other meetings to share results, interpretations or ideas emerging from the assessment process
- reflect critically about the assessment process and the child's engagement with it



Every interaction matters

In addition, Education, senior Residential and Wellbeing staff should be able to:

- administer and score the appropriate assessments for each child, within their area of specialism
- interpret the results of these in the context of other assessment data
- represent and explain assessments and results to the child, family, colleagues and external professionals where needed


Children should be able to:

- Explain what assessments they have completed and why they were undertaken
- Describe their results in a meaningful way, relevant to themselves and their progress
- Have access to the results of their assessments, unless for any reason this is not in their best interests

## Formulation competencies and skills

All staff should be able to:

- explain to children, families, colleagues and external professionals what a Formulation is and why we use this method at Restore
- understand Formulation in terms of the ethos and principles of Restore, in particular seeing it as a vital relational intervention, attending to its potential to empower a child, its role in responding to and addressing trauma, and the need to make it possible for a child to feel a sense of ownership over his or her own story and the means by which it is communicated
- support children to attend and participate fully in Formulation
- prioritise and support Formulation meetings as a key enabler of the work of Restore
- contribute their experiences and impressions of the child in a Formulation meeting or to designated staff attending a Formulation meeting
- locate given child's Formulation on their electronic record
- read, understand and use children's Formulations to enhance their understanding of a child and the quality of care they offer them
- reflect on how they use the information in a Formulation to guide their interactions with a given child
- ensure that information from a Formulation is treated with care, dignity and respect for the child's privacy



Behaviour is  
communication

- notice and celebrate positive changes in a child through and reflected in their Formulations

In addition, Core Team members from a range of disciplines should be able to:

- arrange Formulation meetings with the key adults in the child's system, ensuring that there are spaces for open discussion (with or without the child present) and that the setting is not overwhelming or aversive for the child.
- orientate the child to the Formulation process in advance, ensuring that they are well-prepared, willing and confident to attend
- facilitate Formulation meetings in a sensitive, authoritative and therapeutic manner, according to their designated roles at Restore
- listen to and draw on colleagues' experiences of a given child in a Formulation meeting
- co-write the written narrative Formulation document with the child, following the meeting, ensuring that it is written in a therapeutic style that fosters the child's sense of hope and potential, integrating multiple perspectives and ideas, using the child's language where possible and appropriate
- ascertain with whom it is possible and helpful to share the written Formulation, disseminating it in a respectful and secure manner with the child's consent
- ensure that the written Formulation and all subsequent re-Formulations are entered on the child's electronic record
- ensure that the child's Core Team and others working with the child are aware of updates to the Formulation, are closely familiar with it, and are putting the ideas that it generates into practice with the child.

Children should be able to:

- Explain what a Formulation is (both the document, and the meeting that generates it)
- Co-write their Formulation with members of their Core Team
- Have access to their Formulation at any time
- Define whom they wish it to be shared with, externally, and in what form

## Quality Assurance

The process and content of assessment and formulation at Oasis Restore will be subject to careful testing and refinement over time as new and more effective measures and ways of working evolve. This means that we will frequently review and improve our practice based on experience, drawing on developing knowledge and research in the field.


Within the school, we will provide training and informal apprenticeship for staff in working with children during the assessment period, administering the assessments, and facilitating, developing and using formulations. Further training will be available on an annual basis, and as our practices and methods evolve.

On an **informal** level, individual and group supervision and reflective practice groups offer opportunities for informal quality assurance. Difficulties, confusions and omissions come to light and can be addressed there and then, within the culture of enquiry that characterises Oasis Restore. Staff competence and sensitivity in terms of assessment and formulation practice will be explored and supported through this process. This can be enhanced by **practice** observations, which will be carried out by senior staff and clinical supervisors, for example, joining Formulations, or reviewing a set of assessments with a given child's Core Team.

Supervisors and facilitators' observations are brought to the attention of leadership via fortnightly feedback meetings (the **Practice Development Meeting**) whereby themes, concerns and quality issues can be explored and plans made for them to be addressed.

**Formal monitoring** of the quality of practice in assessment and formulation will be undertaken according to the systems mapped out in our Quality Assurance policy (see Appendix 9):

- **Dip Sampling** (whereby House Managers and other senior leaders systematically sample a range of children's records to examine the quality of practice in a given area, and feed results back to inform supervision and training)
- **Quality audits**, targeting particular areas of practice on a bi-monthly basis.
- **Thematic audits**, generated by observations of practice where areas for improvement have been highlighted.
- File audits (whereby a given number of children's files are audited by senior managers on a monthly basis).
- **Feedback** from children via the Student Council, Community Meetings, directly to their Core Teams, and via Leavers' Interviews.



Every experience is  
an opportunity to  
learn

**Leadership monitoring of the Assessment and Formulation processes** will include measures of:

- Completion of the constituent parts of assessment within a 1-week, 4-week and 12-week period, and of ongoing assessment measures at the given intervals thereafter
- Timely and appropriate occurrence and attendance of Formulation meetings at 1 week, 4 weeks and every mid-term thereafter
- Staff awareness, engagement and practical use of the written Formulation documents as well as in-person meetings, in the service of the therapeutic care of children at Restore.
- Child's ownership and familiarity with their Formulation and with the results of their assessments
- Use of new assessment feedback in the Formulation meetings
- Good and timely information-sharing around assessments and Formulations with the child's network.
- Review of knowledge delivery through measurements against national measures of progress

## Glossary of Terms (in this context)

**Assessment** The process of developing a deep and dynamic understanding a child by means of a variety of forms of information-gathering that examine and evaluate different aspects of their emotional, social, cognitive, academic and personal development.

**Formulation** The process of using the data gathered through assessment, and particularly through live discussion with the child, to develop a contextualised, meaningful, shared narrative account of what is going on for them, that should indicate potential needs and the means by which they might be met. A Formulation meeting involves a process of discussion moving towards such an understanding; and a Formulation itself is the narrative account that emerges. The Formulation can be written up by any appropriately trained member of staff but is developed collaboratively with the team and the child.

### **Restore Early Days Assessment (RED-A)**

The RED-A is a live document developed in the first four days of a child's stay at Restore and shared between staff as a means of summarising a preliminary understanding of who they are, why they are at Restore and the principal risks and needs they present. It includes information from past reports and other documents as well as observations from staff at Restore and the information the child provides. The Restore Networker is responsible for compiling and sharing this with the rest of the staff team.

### **Restore Assessment**

The Restore Assessment is a detailed development of the RED-A that includes the results of all assessments undertaken with the child. It should be in a form that can be usefully shared with external professionals and should represent a useful synthesis of all the information known about the child to date. It may include the child's current Restore Plan and Formulation. The Restore Networker is responsible for ensuring that it is complete and coherent; other professionals, principally the Core Team, will provide much of the information it contains and may take responsibility for writing parts of it.

**Restore Plan** The Restore Plan is a document that summarises the current plan around the child and who is responsible for working with the child in the various areas identified. It needs to include the Formulation, the child's current timetable, and represent the integration of all other plans around the child (e.g. healthcare care plans, sentence plans, transition plans). The Restore Networker is responsible for ensuring that it is current, accurate and meaningful, along with the Core Team.

### **Restore Summary**

The Restore Summary is the final document produced when the child is ready to leave Restore, and should include all the assessment information, details of any therapeutic, academic or other work or progress the child has made, the current Formulation, recommendations for their future care and support, and the child's own view and experience of the work at Restore. It should be in a form that can be shared with external professionals. The Restore Networker is responsible for ensuring it is complete but will require collaboration and co-writing from a variety of staff who have worked with the child.

### **Oasis Restore Passport**

A document or portfolio that summarises the child's achievements and progress while at Restore. It may include the Formulation if the child wishes, or an edited version that the child is happy to share.

# Assessment and Formulation

## PRACTICE GUIDE



### Child-centred process

Assessment with a child needs to be at his or her pace, offered sensitively in the most informal and conversational way possible. It needs to be delivered in a **caring** way, **simple** to understand, **relevant** to the child's needs and priorities, and **practical** – leading to real and useful plans. If a child is unwilling or unable to take part, we need to stop, listen, and adapt our approach.

### In depth, dynamic assessment

We aim to gather information that gives us a full and rich picture of a child's needs, strengths and progress, and to track this over time and relate it to a deeper understanding of the child, their context and unique journey. We gather a range of 'baseline' assessments in the first 12 weeks, a repeating set every mid-term, and a final set near the child's leaving date

### Making sense as a team

In line with our culture of enquiry, we work together as a whole team to understand each child, knowing that each of us will experience different aspects of each child and that it is vital to bring these together. These assessments and observations enable us to develop a Formulation (a written understanding of the child) that develops through mid-termly Core Team reviews.

### Role of the Core Teams

Core Teams, with staff from all parts of Oasis Restore, meet each child every week and are responsible for gathering and making sense of assessment data, formulating what is going on, and developing the Restore Plan and other documents with the child. As a member of a Core Team, you contribute to this

### The child's voice

The child's voice, wishes and aspirations are at the centre of this process. Key parts of our assessment process are designed around a focus on the child's goals and strengths. Core Teams offer a caring, safe opportunity to understand life from the child's perspective and to ensure the right support is in place, reflected in the Restore Plan.

### Key Documents

The child's Restore Passport records their achievements. The Restore Assessment brings together all the information we have about them. The Formulation makes sense of this as a narrative description. The Restore Plan is a unified plan for their time with us. The Restore Summary brings information together as they leave.