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| **Policy document control box** | |
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## Purpose

This policy enshrines that Turtle Dove Cambridge Alternative Provision aims to ensure that we provide the best possible learning experience for all students referred to Turtle Dove Cambridge Alternative Provision and to ensure that all young people are safe in line with statutory safeguarding guidance. In order to achieve this, we aim to enable all staff to monitor their own practice and constantly seek to improve.

## Scope

All staff are expected to be reflective practitioners; managers are expected to support those staff that they directly line-manage to reflect upon practice and plan strategies to develop and improve practice.

## Policy statement, provision and safeguards

Quality assurance is achieved through the following key areas (each bullet point is expanded within the policy):

* individual staff monitoring the progress of their students and reflecting critically upon their work;
* the Alternative Education Lead developing ongoing systems of self-evaluation;
* the Alternative Education Lead carrying out annual performance reviews;
* all staff participating in an annual performance review;
* annual questionnaires to students and parents seeking feedback on their experience;
* Directors undertaking specified roles (e.g. safeguarding) to monitor the quality of provision;
* evaluating well-being provision.

The theoretical model that underpins all Turtle Dove Cambridge Alternative Provision’s quality assurance work is action research. Staff and students are encouraged to work in an action research cycle:

* plan,
* do (implement the plan),
* evaluate,
* plan again in light of the evaluation - modify practice accordingly, and…
* do,
* evaluate,
* plan… ongoingly.

In some cases this model may be formalised and written up as research, most usually it is simply a way of being and practising that leads to high quality provision.

# Responsibilities

### Individual staff:

All staff, regardless of their role, are expected to be reflective practitioners who learn from their experiences and modify practice in light of that learning. We expect student voice (i.e. staff discussing practice / learning with students) to be a central factor in that reflection.

### Alternative Education Lead building self evaluation into daily practice:

The Alternative education Lead is responsible for ensuring that a thorough, robust self evaluation (SEF) of the provision’s work is available for external inspection. Self evaluation should be seen as a permanent aspect of provision work rather than a ‘one off’ piece of work. Self-evaluation serves as a tool for practice development first and an informative collation of data for inspection second.

### Professional development of all staff:

Every member of staff participates in an annual cycle of performance management. The Alternative Education Lead must ensure that every member of staff has an annual review meeting. The nature of discussions at the meeting will depend upon the role undertaken by the member of staff and the accountabilities assigned to them.

Key features of all reviews will be:

* clarification of individual accountabilities and responsibilities;
* self evaluation of practice by staff member;
* feedback on practice (this should be ongoing throughout the year, hence there should be no ‘surprises’);
* agreement upon ‘focus areas’ for the coming year;
* identification of any training requirements / needs.

### Annual questionnaires to students and parents:

The Alternative education Lead is responsible for ensuring that online questionnaires go out to all students and parents, that data garnered is collated and fed back to The Board of Directors and staff, and that any key issues raised are pursued.

# Safeguarding

Safeguarding is a core element of all practice and the responsibility of every member of staff. We seek to ensure the very highest level of practice here through:

* appointing a Safeguarding Lead person and Deputy;
* ensuring the Board of Directors understand their responsibilities towards safeguarding (including annual monitoring of policy documents, receiving a report from the safeguarding lead, and auditing practice);
* making safeguarding a key element of induction for all staff;
* ensuring all staff are trained to appropriate levels.