

# Staffordshire County Council

## Quality Assurance Framework for Alternative Education Provision

### Self-Assessment Form for AP Providers

<b>Provider Name</b>	Phoenix U16 Independent School
<b>Address</b>	UNIT E, METRO BUSINESS PARK, CLOUGH STREET, HANLEY, SOT, ST1 4AF

Email Address	Website	Tel. No		
office@phoenixlearning.co.uk		01782 922306		
Head of Provision	Name of DSL	Name of SENDCo		
Shelley Jamieson	Stephanie Hardman	Shelley Jamieson		
Meeting between		Date	Time of visit	
Provider	Entrust		Start	End
SH and SH	Kate Brown	27.9.23	1.30	3.00

Overview of Activities Undertaken during visit:
<p>Phoenix U16 Independent School provides full-time education for pupils between the ages of 14 and 16. Some pupils are dual registered with other education providers. Pupils attending Phoenix U16 Independent School typically have a range of social, emotional, and behavioural difficulties. Most have either been excluded or are at risk of exclusion from their previous setting.</p> <p>Meeting with Shelley Jamieson, Head of Provision and Stephanie Hardman, DSL lead.</p> <p>Tour of the site.</p> <p>Website scrutiny.</p> <p>Policy scrutiny.</p>

## 1. INTRODUCTION

For the purposes of this guidance the definition of Alternative Provision is as follows:

*For the purposes of this guidance, the definition of alternative provision is as follows: education arranged by local authorities for pupils who, because of exclusion, illness or other reasons, would not otherwise receive suitable education; education arranged by schools for pupils on a fixed period exclusion; and pupils being directed by schools to off-site provision to improve their behaviour.*

*DfE Statutory Guidance for local Authorities January 2013*

The Staffordshire County Council Alternative Provision Quality Assurance Framework aims to:

- Improve provider performance
- Raise the profile of Alternative Providers in Staffordshire
- Establish better collaboration between commissioners and Alternative Providers
- Safeguard the wellbeing of all Staffordshire children accessing education in the Alternative Provision (AP) sector
- Ensure all learners receive consistent high quality learning experiences and statutory entitlement
- Inspire confidence across Alternative Providers and support the culture of continual improvement within the AP sector
- Enable recognition and sharing of good practice across schools, colleges and other providers

The Framework is based on the view that effective quality assurance:

- Is on going
- Puts the learners and learning at the centre
- Is embedded in effective partnerships between the commissioners, Alternative Provider and learners
- Emphasises the fundamental importance of self-evaluation and continual improvement

## 2. FRAMEWORK

There should be no major aspects of the framework which Alternative Providers are not already familiar with as it reflects and builds on national inspection requirements.

All Alternative Providers are fully responsible for the quality of learning that they provide. The framework provides consistent requirements that support the regular review of each Alternative Provider.

The framework covers six themes as follows:

- 1) **Safeguarding:** Page 4
- 2) **Health and Safety:** Page 7
- 3) **Admissions, Guidance and Support:** Page 9
- 4) **Teaching and Learning:** Page 11
- 5) **Outcomes for learners:** Page 12
- 6) **Leadership and Management:** Page 13

The Framework outlines the requirements that would be expected to be evidenced in each theme.

The "Evidence" Column summarises the types of documents, or other, that would support the provider in showing how they meet the required standards.

## 3. THE QUALITY ASSURANCE PROCESS

- Each provider will be given **one months' notice of the visit**. This document should be returned to Entrust 5 working days before the scheduled visit
- We advise all providers to read the framework document and prepare all relevant evidence for the day of the QA visit.
- If there are any queries in advance, please contact the QA lead who will support you in your preparations for the visit.
- The expectation would be that each visit is carried out in partnership with the providers instead of done to the provider. Therefore, we would expect and welcome managers to join the QA visit.
- Each visit would take no longer than **1/2 a day**.
- Each visit will result in a report written by Entrust and shared with the AP provider and SCC.

## THEME ONE: SAFEGUARDING REQUIREMENT

**PRINCIPLE:** Young people feel safe

SCC Education Safeguarding Leads:

Lisa Farmer [lisa.farmer1@staffordshire.gov.uk](mailto:lisa.farmer1@staffordshire.gov.uk)

Viki Hulme [viki.hulme@staffordshire.gov.uk](mailto:viki.hulme@staffordshire.gov.uk)

	Requirement	Evidence	Requirement met (Please delete as applicable)
1	<p>Access to the site is restricted to registered pupils and the organisation's own staff</p> <p>All staff have current required checks which are recorded on a single central record</p>	<ul style="list-style-type: none"> <li>• SCR and HR files (Any letters of assurance for visitors, third party or agency staff e.g., SCC for workers who do not carry DBS)</li> <li>• Controlled access to Site.</li> <li>• Sign in and sign out procedures</li> <li>• Supervision at arrival, departure, and social times in place.</li> <li>• Visitors' procedures (informed of how to report a concern, to who and relevant policies to be aware of how to act if they have concerns about a child i.e., who to speak to).</li> <li>• Contractors have appropriate checks and supervision.</li> <li>• Shared site arrangements if appropriate – N/A</li> </ul>	<b>FULLY</b>
<p><b>COMMENTS:</b>            SCR seen and compliant. Access is restricted. All staff are signed up to the update service.            Signing in and out procedures in place for visitors and students. Visitors are informed of emergency procedures on arrival.            Contractors on site are supervised at all times by a member of staff, however the majority attend out of school hours.            There are no shared site arrangements.</p>			
2	Section 175 Audit & Action Plan in place	<p>SCC 175/157 audit (evidence of completion/copy of report) and action plan complete and tracking progress against action presented.</p>	<b>FULLY</b>
<p><b>COMMENTS:</b>            This is fully in place and has been returned to the LA.</p>			
3	Appropriate policies and procedures in place to safeguard children	<ul style="list-style-type: none"> <li>• Child Protection/Safeguarding Policy (to cover the following: Prevent, CCE, CSE, FGM, FM, Youth Violence/Gangs, Peer on Peer Abuse (incl Sexual Violence and Sexual Harassment), Domestic Abuse, Drugs and Substance misuse, Gangs, Fabricated Illness, Faith Abuse, Gender based violence, private fostering, sexting and trafficking)</li> <li>• Staff Behaviour Policy/Code of Conduct to include low level concerns (Part 4 KCSiE 2022)</li> <li>• Whistleblowing Procedures</li> </ul>	<b>FULLY</b>

		<ul style="list-style-type: none"> <li>Recruitment &amp; Selection Policies</li> <li>E- Safety policy and strategy</li> <li>First Aid Policy</li> <li>Attendance and punctuality procedures</li> <li>Education visit and risk assessments</li> <li>SEN policy</li> </ul>	
<p><b>COMMENTS:</b>  The current Safeguarding policy refers to KSCIE 2023 however the updated version needs to be uploaded to website. Website includes the following policies – Safeguarding, online safety, safer recruitment, complaints, relationship and sex education, and low-level concerns policy. Stakeholders can request additional policies. All policies include review dates. Overview spreadsheet of all policies with review dates and lead responsible seen. Examples of RA’s seen including off site visits.</p> <p>ACTION; To upload amended Safeguarding policy (Sept 23) to website.</p>			
4	Designated safeguarding lead in place	<ul style="list-style-type: none"> <li>DSL (named on Safeguarding Policy) on site and cover for DSL in place when not available.</li> <li>Appropriately trained with evidence of regular updates and attendance at DSL network meetings/briefings</li> </ul>	FULLY
<p><b>COMMENTS:</b>  DSL – Stephanie Hardman named on policy and detailed on information displayed on site. Five members of staff are trained at DDSL level for safeguarding which equates to 50% of staff. Training record for Safeguarding seen which includes dates for refresh etc.</p>			
5	Robust processes and procedures for recording concerns, record keeping (including transfer of files) and sharing information.	<ul style="list-style-type: none"> <li>Student files and referrals.</li> <li>Safeguarding files contain a file front sheet, with a subsequent chronology (most recent date at the front), including records of concerns etc. Evidence of supervision/child discussions and any decision/rationale MUST be recorded on the child’s file (electronic/paper) Any referrals that have been made, early help paperwork, CIN/CP paperwork</li> <li>Safeguarding files are held securely with only appropriate and authorised safeguarding staff having access.</li> <li>Safeguarding staff are confident and competent in the procedure for the transferring of any safeguarding records/concerns to the relevant setting in a timely manner with the ‘Transfer of Safeguarding Records’ form signed by both sending and receiving setting</li> <li>Identify vulnerable learners and look if they are appropriately supported with interventions/support plans/safety plans/risk assessments if applicable.</li> </ul>	FULLY

**COMMENTS:**

Student information securely stored on CPOMS with restricted access in place.  
 Staff are aware of policy and procedures as detailed in Safeguarding policy.  
 The DSL has good links with local schools and multi agencies.

6	Appropriate provision for Looked After Children	<ul style="list-style-type: none"> <li>• Who is the designated person for LAC?</li> <li>• Is it clear from the Safeguarding Policy etc. who this member of staff is?</li> <li>• Do you know who your contact is within the virtual school.</li> <li>• LAC files-suitably and securely kept with front sheet and chronology.</li> <li>• Aware of the new duties of the Head of the Virtual School in relation to children who have previously had a social worker</li> </ul>	<b>FULLY</b>
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**COMMENTS:**

Designated lead for LAC is Megan Fuller, as detailed in the Safeguarding policy.  
 Good links with SoT VS. Have historically liaised with SCC VS.

7	Appropriate procedures to safeguard Children Not in School	<ul style="list-style-type: none"> <li>• Registers are completed promptly following appropriate procedures.</li> <li>• Action plan if a child is missing from lesson</li> <li>• Attendance policy and procedures</li> <li>• Communication with commissioners and parents.</li> <li>• Children missing in education procedures</li> <li>• Contact details of LA Officers and arrangements. (see SSCB website)</li> <li>• Understand when it is appropriate to contact the Police for missing children</li> </ul>	<b>FULLY</b>
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**COMMENTS:**

Appropriate procedures in place as detailed in the Safeguarding and Attendance polies.  
 Phoenix U16 work flexibly to prevent any long-term absence liaising with parents/carers and multiagency. Intervention takes place before 5<sup>th</sup> day of absence. All students attend on a FT basis.  
 Attendance levels – 92% for last academic year (2022/2023).

## THEME TWO: HEALTH AND SAFETY REQUIREMENT

**GUIDING PRINCIPLE:** Young people are safe on and off the premises.

	Requirement	Evidence	Requirement met (Please delete as applicable)
1	An up-to-date Health and safety policy is in place and accessible to all staff, young people, careers and visitors and a there is a designated person who is held ultimately responsible for health and safety	<ul style="list-style-type: none"> <li>• Designated Health and Safety Officer</li> <li>• Displayed notice naming the designated person for health and safety to whom these issues should be reported</li> <li>• Knowledge of requirements of health and safety legislation</li> <li>• 'Competent' health and safety advice available</li> <li>• Appropriate health and safety signs and notices</li> <li>• Completed Health and Safety Checklist.</li> </ul>	<b>FULLY</b>
<p><b>COMMENTS:</b>  H&amp;S checklist central record seen detailing calendar of events and when checks were completed, eg; – PAT testing, electrical testing etc. Very thorough.  Fire safety log seen and compliant including emergency lock down.  Weekly testing for fire alarms completed.  First aid checklist, monthly, very thorough.  Signage checked and compliant. Fire safety officer displayed at front desk.  Following the last Ofsted inspection an external audit was commissioned by Phoenix U16 and they were found to be fully compliant.</p>			
2	Risk assessments have been carried out to identify significant risks on / off site	<ul style="list-style-type: none"> <li>• Adequate risk control measures/ risk register.</li> <li>• Record of at least yearly regular reviews</li> </ul>	<b>FULLY</b>
<p><b>COMMENTS:</b>  Overview record of RA's which need to be reviewed, annually cycle or if circumstances change.</p>			
3	Fire drills take place regularly, at least once a year	<ul style="list-style-type: none"> <li>• Fire alarms are regularly tested and meet the Fire Brigade's criteria Fire extinguishers tested regularly</li> <li>• Staff trained in fire prevention measures</li> <li>• Diary showing recent fire drills and notes</li> <li>• Certificate showing tests of fire alarms</li> <li>• Display a list of fire wardens</li> </ul>	<b>FULLY</b>
<p><b>COMMENTS:</b>  Seen and complaint.</p>			

4	Public liability insurance policy is current, and the insurance certificate is displayed	<ul style="list-style-type: none"> <li>• Public liability insurance document</li> <li>• Other relevant insurance documents</li> </ul>	<b>FULLY</b>
<p><b>COMMENTS:</b> Certificate displayed in reception, expiry date 31.1.24. in line with Staffordshire. Copy provided to SCC.</p>			
5	First aid equipment and/or facilities are readily available	<ul style="list-style-type: none"> <li>• Arrangements for access to a qualified first aider</li> <li>• Recording systems for accidents and first aid treatments and notification to the and/or the parents/carers</li> <li>• Evidence of any RIDDOR investigations underway or outcomes pending</li> <li>• List of trained first aiders displayed</li> <li>• Medical Needs policy</li> <li>• Care plans.</li> </ul>	<b>FULLY</b>
<p><b>COMMENTS:</b> First Aid Policy in place. First aiders named and displayed on site. No RIDDOR investigation pending. No care plans currently in place.</p>			
6	Arrangements are in place for supervision of young people	<ul style="list-style-type: none"> <li>• Supervision arrangements</li> <li>• Rotas</li> <li>• Ratios of staff to young people identified according to need and upheld</li> </ul>	<b>FULLY</b>
<p><b>COMMENTS:</b> Students are supervised at all times. Most lessons that take place are 1:6 ratio. Staffing structure discussed and staff rota in place and seen. Additional provision provided - breakfast club 7.30 – 8.30, and after school provision. Homework club is held after school each day.</p>			



## THEME THREE: ADMISSIONS, GUIDANCE AND SUPPORT

**GUIDING PRINCIPLE:** Learners' access tailored learning programmes and support matched to their individual needs

	Requirement	Evidence	Requirement met (Please delete as applicable)
1	Admission and referrals procedures are clear and well supported	<ul style="list-style-type: none"> <li>• Admission/ Referral policy</li> <li>• Admission/ Referral application forms</li> <li>• Integration process/ Student files</li> <li>• Induction process: base lining, Learning Plans, Timetables, Groups (register), IAG</li> <li>• Target and tracking sheets</li> </ul>	<b>FULLY</b>
<p><b>COMMENTS:</b>            Admission policy in place. Phoenix U16 have devised their own referral form for schools to ensure all information required is received. CPOMS holds student confidential data.            Induction process detailed. Student, parent/carers invited to attend where school rules, expectations, tour of the building, meet with staff is facilitated. A joint agreement is in place with the setting, student, and parent/carers.            As part of student induction two days of baseline testing is undertaken (CAT tests, Reading, Spelling, etc) to establish levels and plan appropriate provision.            Regular updates to parents via email including termly letter for parents and newsletter.            IAG built into the curriculum, staff regularly attend college interviews/open days with students.</p>			
2	All learners participate in an induction process that will help them understand options, health and safety procedures, their rights and responsibilities and are aware of equal opportunities	<ul style="list-style-type: none"> <li>• Integration process/ Student files</li> <li>• Induction process: base lining, Learning Plans, Timetables, Groups (register), IAG</li> <li>• ILPs</li> <li>• Student voice</li> </ul>	<b>FULLY</b>
<p><b>COMMENTS:</b>            ILP's are in place.            Student voice is captured extensively with half termly student voice formal sessions, twice weekly forums, and a student suggestion box. Speaking and listening activities are built into the curriculum to stimulate discussion and empower students.            Three parents/carers' evenings held annually.            Reports are generated every half term which include attainment, predicted grades, behaviour, and attitudes.</p>			
3	The voice of the child is heard and acted upon	<ul style="list-style-type: none"> <li>• Student council</li> <li>• Student questionnaires</li> <li>• Tutor systems</li> <li>• Examples of how students voice shaped provision.</li> </ul>	<b>FULLY</b>

**COMMENTS:**

Tutor groups are in place with approximately eight students per group.  
Please see comments in section 2 above.

A structured process of IAG is in place which supports students' progression into further education employment or training.

- IAG offer
- Individual plans
- Partnership with colleges, WBLP, Schools, employers
- Destination data
- Post 16 application processes and procedure
- Careers Fairs, Attendance at Skills show etc.

**FULLY**

**COMMENTS:**

Good partnerships with colleges, schools reported.  
Destination data collected. During September staff will work with those students who have not yet secured a place in FE/employment. For the last academic year only one student remains not placed.

## THEME FOUR: TEACHING AND LEARNING including pupil outcomes

**GUIDING PRINCIPLE:** Learners' access high quality teaching and learning experiences and make good progress

	Requirement	Evidence	Requirement met (Please delete as applicable)
1	Delivery staff are appropriate to deliver programmes	<ul style="list-style-type: none"> <li>High quality staff with suitable training, experience and safeguarding checks.</li> <li>Good practice is identified and disseminated</li> <li>Strategies are in place to ensure that the professional development needs are met</li> </ul>	<b>FULLY</b>
<p><b>COMMENTS:</b>            Staff register with qualifications seen. All qualification certificates are checked on appointment. CPD is a priority for Phoenix U16 with a focus on SEND for this academic year. Staffing training records seen, recent training includes, ACE's, and autism. Staff access training in response to student's needs. Phoenix U16 buy into 'The Key' and are able to access their training.</p> <p><b>ACTION;</b> To explore the possible expansion of assisted technology to support students recording and accessibility.</p>			
2	Planning for learning shows: <ul style="list-style-type: none"> <li>Good academic attainment on par with mainstream schools – particularly in English, maths and science (including IT) – with appropriate accreditation and qualifications.</li> <li>That the specific personal, social and academic needs of pupils are properly identified and met to help them to overcome any barriers to attainment.</li> <li>Improved pupil motivation and self-confidence, attendance and engagement with education.</li> <li>Clearly defined objectives, including the next steps following the placement such as reintegration into mainstream education, further</li> </ul>	<ul style="list-style-type: none"> <li>Timetable</li> <li>Session planning / Lesson plans/ with appropriate use of resources.</li> <li>Individual Plans including next steps</li> <li>Internal staff observations</li> <li>Progress and review reports and data shared with home/ School</li> <li>Students' books and portfolios/online pupil evidence</li> <li>Student feedback</li> <li>Parent/Carer feedback</li> <li>good arrangements for working with other relevant services such as social care, educational psychology, child and adolescent mental health services, youth offending teams and drug support services etc.</li> <li>Underperformance is addressed through appropriate intervention and support</li> </ul>	<b>FULLY</b>

	education, training or employment.		
<p><b>COMMENTS:</b>  Timetables, weekly planners seen. Students are told what the areas of study are for the day.  Learning walks and observations take place half termly. Records seen. Links to staff appraisals.  Lesson plans are produced for each lesson. Documentation seen.  There are six assessment points throughout the year for students. Progress is reported and parent's evenings held generate an action plan for the student to identify areas to work on and interventions.  Multi agency working evidenced and discussed for example attendance at MACE panel and harm reduction panel.  Student sample books seen. All marked up to date and well presented.</p>			

## THEME FIVE: OUTCOMES FOR CHILDREN

**GUIDING PRINCIPLE:** Learners achieve high standards and make good progress relative to their starting points

	Requirement	Evidence	Requirement met (Please delete as applicable)
1	Learners meet the targets set in relation to their starting points and make at least good progress	<ul style="list-style-type: none"> <li>• Progress trackers/data provided to commissioners at least termly.</li> <li>• Formative and summative assessment</li> <li>• Portfolios and books</li> <li>• Reports home – schools</li> <li>• Students' voice</li> </ul>	<b>FULLY</b>
<p><b>COMMENTS:</b>  Student baseline assessments held on secure site.  Student sample books seen. All marked up to date and well presented.  'Triple P' targets used to provide clarity on expectations for students and as evidence for achievement. A prize draw is held every week for students who have achieved in all aspects.  Praise 'post its' are used to motivate students, emails home etc.  Students who do not comply receive a detention and a phone call home. This system is working well.</p>			
	Requirement	Evidence	Requirement met (Please delete as applicable)
2	Analysis of assessment data enables clear indications of:	<ul style="list-style-type: none"> <li>• Exam outcomes</li> <li>• Unit completion and progress against syllabus</li> <li>• Attendance and behavior data</li> <li>• Rewards and Sanctions</li> <li>• Exclusions data</li> </ul>	<b>FULLY</b>

	<ul style="list-style-type: none"> <li>• how well the provider is doing in relation to its targets</li> <li>• how effective it is in identifying specific groups of learners' needs</li> </ul>		
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**COMMENTS:**  
 No exclusions to date.  
 To date all students have gain some GCSE certificates.  
 Last academic's year attendance was 92%.  
 Destination data collected and retained.

	<b>Requirement</b>	<b>Evidence</b>	<b>Requirement met (Please delete as applicable)</b>
3	Underperformance is addressed through appropriate intervention and support	<ul style="list-style-type: none"> <li>• Planning</li> <li>• Menu of intervention e.g., Literacy, Numeracy, Behaviour, SEN7</li> <li>• Updated ILP showing regular reviews.</li> <li>• Allocation of key workers</li> </ul>	<b>FULLY</b>

**COMMENTS:**  
 Each student has a tutor/key worker.  
 Lesson planning and review evidenced.

## THEME SIX: LEADERSHIP AND MANAGEMENT

**GUIDING PRINCIPLE:** Leaders and managers work with commissioners to focus on consistently improving outcomes for learners

	Requirement	Evidence	Requirement met (Please delete as applicable)
1	<p>There is a secure agreement setting out the responsibility of the provider and the feeder institution</p> <p>Schools and providers work in partnership with individual learners and parents and carers to monitor and review individual needs, abilities and aspirations.</p>	<ul style="list-style-type: none"> <li>• Signed SLA with Commissioners.</li> <li>• SLA- outlining Provider's responsibilities and commissioner's responsibilities.</li> <li>• Named link person to commissioners/networks</li> <li>• ILP aligned to EHCP /Statements as appropriate.</li> <li>• Reports to commissioners.</li> <li>• Clear arrangement and contracts with sub-contractors.</li> </ul>	<b>FULLY</b>
<p><b>COMMENTS:</b> Strong links with local schools, commissioners, and multi- agencies.</p>			
2	<p>Effective lines of communication exist within and between organisations</p>	<ul style="list-style-type: none"> <li>• Regular reports to commissioners</li> <li>• Commissioners' visits</li> <li>• Attendance at provider briefings, networks and training.</li> <li>• Commissioner attendance at reviews: CP meetings, LAC reviews, Spotlight SWARMS, YOT reviews.</li> </ul>	<b>FULLY</b>
<p><b>COMMENTS:</b> Phoenix U16 attend SoT provider meetings. Half termly reports are forwarded to schools and commissioners and invited to review meetings.</p>			
3	<p>Effective self-evaluation procedures are in place</p>	<ul style="list-style-type: none"> <li>• SEF/ SAR</li> <li>• Internal Improvement- Development Plans</li> <li>• External Audit reports</li> <li>• Audit reports/ Annual accounts</li> <li>• Any previous QA visits and corresponding reports.</li> <li>• Referral/ Admissions data (Last 3 years)</li> </ul>	<b>FULLY</b>
<p><b>COMMENTS:</b> Strategic development is reviewed on an ongoing basis via lesson planning, and observations, data analysis, behaviour and attitudes, and leadership and managements targets. Phoenix U16 Independent School would like to grow their offer in the future and support an additional number of students possibly with an additional site.</p>			

## IMPROVEMENT PLAN

Areas for improvement (theme and criterion)	Actions	By when	Person responsible	Date and review of Progress
Safeguarding	To upload amended Safeguarding policy (Sept 23) to website	asap	Stephanie Hardman	Completed 28/09/23
Teaching and Learning	To explore the possible expansion of assisted technology to support students recording and accessibility.	On going	Shelley Jamieson	

## QA EVALUATION

Please also write your comments on the recent QA process here:

<b>What was beneficial?</b>
The QA visit was beneficial as it allowed us to reflect on our practice under with appropriate challenge from a fellow professional with experience and expertise in the area being quality assured. We very much enjoyed the discussions had.
<b>Any issues arising?</b>
None
<b>How could the process be improved?</b>
Nothing comes to mind.
<b>What good practice would you be prepared to share wider?</b>
Anything that could add value to others.