**Inclusive Education Audit – Alternative Provision Version**

**Parent/Carer Questionnaire**

Name of Alternative Provision setting:

Name of main education setting (school or college):

Year group of your child:

Date of completion:

***Please note, questions are in relation to the Alternative Provision Setting, not the child’s main education setting (school or college).***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Statement** | **Agree** | **Partly agree** | **Disagree** | **Not applicable** |
| My child is happy and enjoys attending the alternative provision setting.  |  |  |  |  |
| My child has friends at the alternative provision setting |  |  |  |  |
| I am aware of my child’s targets whilst at the alternative provision and what is being done to reach them |  |  |  |  |
| I feel my child is making progress at the alternative provision setting.  |  |  |  |  |
| I know who to contact at the alternative provision setting if I have any concerns. |  |  |  |  |
| I feel respected by the staff at the alternative provision setting and treated as an equal partner in the education of my child. |  |  |  |  |
| There is effective communication with the alternative provision setting. |  |  |  |  |
| My child’s individual needs are understood by all staff at the alternative provision setting. I feel they have the knowledge and skills to support them. |  |  |  |  |
| I feel that the alternative provision setting has high aspirations for my child. |  |  |  |  |
| If my child has faced difficulties, the alternative provision setting has supported my child and communicated with me about it, involving specialists if required. |  |  |  |  |
| The alternative provision setting provides a safe and supportive environment for my child. |  |  |  |  |
| I am involved in all meetings about my child at the alternative provision setting and am aware of the progress they are making. |  |  |  |  |
| The alternative provision setting doesn’t just focus on my child’s education but supports them to develop socially, emotionally, and physically. |  |  |  |  |
| The alternative provision setting supports my child to feel good about themselves. |  |  |  |  |
| The alternative provision setting helps all children to behave well. |  |  |  |  |
| The alternative provision setting deals effectively with reports of bullying. |  |  |  |  |
| The alternative provision setting effectively prepares my child for reintegration into mainstream education or transition to further education or employment. |  |  |  |  |
| The alternative provision setting has asked for my opinion or views on how it could improve. |  |  |  |  |

**These are areas of Inclusive practice at the alternative provision that I feel are really positive/supporting my child:**

**Any suggestions or recommendations for improving Inclusive Practice at the alternative provision:**