MANAGEMENT OF RISK POLICY

Date Agreed:	**October 2024**
Review Date:	**October 2025**
Type of Policy:	**DCAT Non Statutory Policy**

Revision Number	Date Issued	Prepared by	Approved	Personalised by school	Comments
4	Oct 24	SBK	ARC	N/A	Responsibilities amended – Now COO not HoO&G Risk register approach updated
3	Feb 23	JS	ARC	N/A	Updated TOR for ARC committee and Trust management of Risk diagram added
2	Feb 22	MT/JS	ARC	N/A	Removed reference to risk appetite following external risk review
1	Oct 21	MT/JS	A&R	N/A	Rewrite of policy following updated guidance from ESFA

Type of Policy	*Tick* ✓
DCAT Statutory Policy	
	✓

Contents

Our **vision** for our Trust is we exist to:

Help every child achieve their God-given potential

Our **aims** are clear. We aim to be a Trust in which:

Developing the whole child means pupils achieve and maximise their potential

Continued development of staff is valued and improves education for young people

All schools are improving and perform above national expectations

The distinct Christian identity of each academy develops and is celebrated

Our work as a Trust is underpinned by shared **values**. They are taken from the Church of England's vision for Education and guide the work of Trust Centre team. They are:

Aspiration
I can do all things through Christ who strengthens me
(Philippians 4 vs 13).

Wisdom
Listen to advice and accept discipline, and at the end you will be counted among the wise
(Proverbs 19 vs 20)

Respect
So in everything do to others what you would have them do to you
(Matthew 7 vs 12)

Our vision of helping every child achieve their God-given potential is aligned with the Church of England's vision for education and is underpinned by the Bible verse from John: *I have come that they may have life, and have it to the full.*

Our vision is underpinned by being happy and safe. Equally staff need to be in a safe and ordered environment. Decision making should be wise, respectful and aspirational for the highest standards in all we do.

1. Policy Purpose, Principles and Objectives

The purpose of this policy is to set out how DCAT our risk management arrangements contribute to the achieving our vision by ensuring that all we do is done safely and by minimising the risks which arise from across the range of our activities. The policy is founded on three principles:

- that our risk management arrangements complement rather than duplicate core business processes and ways of working so as to help ensure they are an integral part of the way DCAT operates;
- that those arrangements help underpin our commitment to good governance and rigour in business planning and decision-making processes; and,
- that the management of risk is a dynamic process, that is it is continuous not a periodic management intervention.

The duties which this policy and its arrangements help us discharge arise from our statutory obligations and the requirements as set out in The Academy Trust Handbook (issued by the Education & Skills Funding Agency (ESFA)) which expect trusts to:

- manage risks to ensure their effective operation;
- maintain a risk register; and,
- include contingency and business continuity planning in their risk management arrangements.

The arrangements set out in this policy apply throughout DCAT and help ensure a common approach to risk management is adopted in each of our schools and in the role the DCAT centre performs. The objectives of this risk management policy to ensure DCAT to set out:

- what risk management involves;
- the framework of practical arrangements upon which the implementation of this policy is based; and,
- how the risk management arrangements contributes to the overall governance of the trust and its schools.

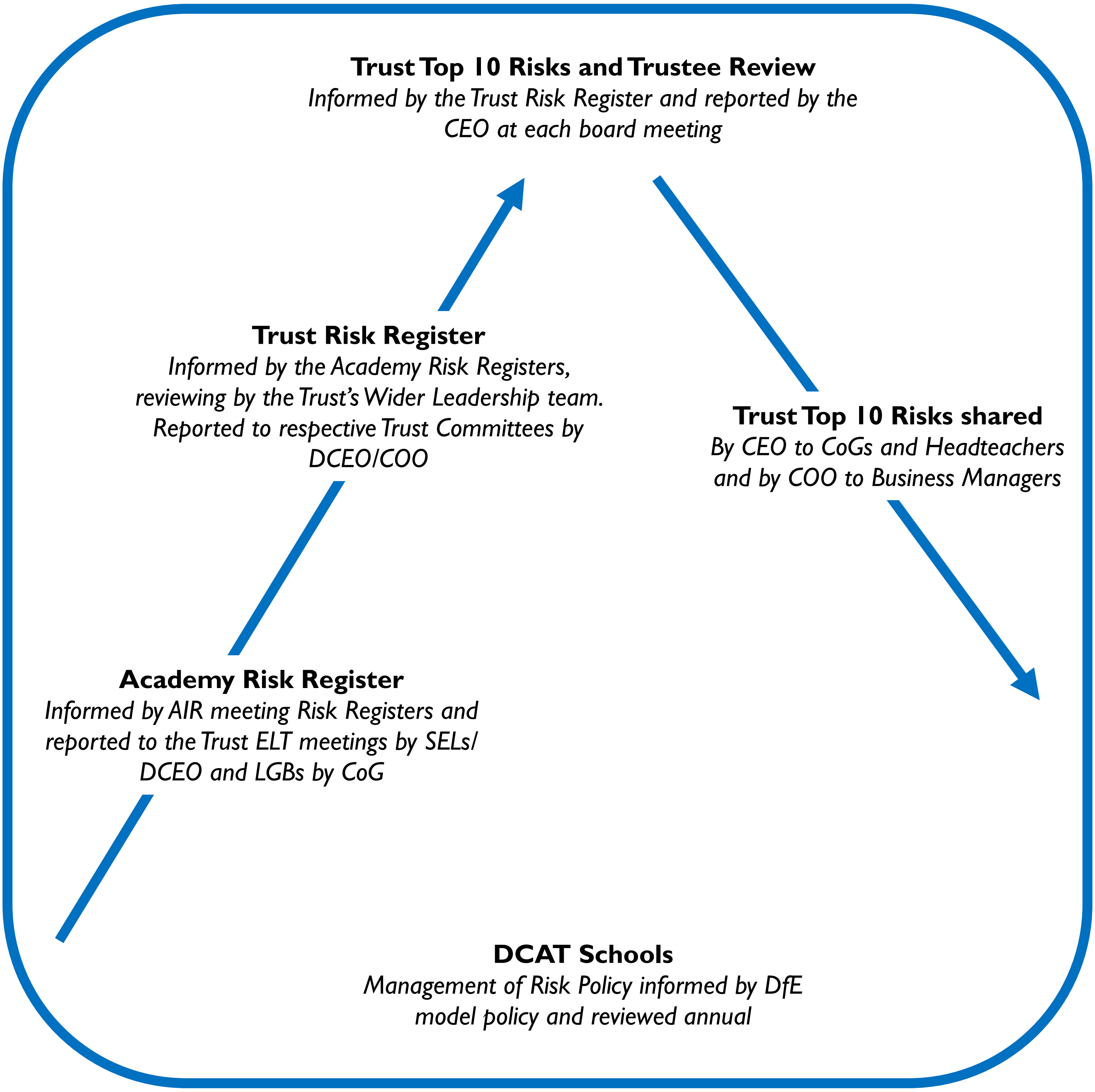
2. What risk management involves

The effective management of risk involves five key functions: the identification of risk; assessing risk (including their measurement); managing risk; then monitoring and finally reporting risk. Risks are essentially threats to the efficient and effective operation of the trust in all its activities. They can arise from a variety of sources such as procedural shortcomings (for example in failing to carry out safeguarding checks), financial management, health and safety weaknesses and from contingencies over which we may have little control, such as a falling roll, natural disasters and of course a global pandemic. The five functions form a virtuous circle which illustrates managing risk isn't a 'one off' or occasional task but a continuous consideration of professional conduct:

The Framework of practical arrangements

Although risk management is integral the organisation and running of all the trust's work activities and therefore integral too to the responsibility of everyone who designs, plans and delivers that work and those activities, it is necessary to establish a framework through which we can account clearly for carrying out our risk managements responsibilities. This framework comprises these features:

- the role of the Board of Trustees
- the role of the Audit & Risk Committee
- the role of the Chief Operating Officer
- the role of each Academy
- the Assessment of Risk, Managing Risk and the Risk Register



The role of the Audit & Risk Committee

While ultimate responsibility lies with the Board of Trustees, it has delegated to its Audit & Risk Committee much of the regular work to discharge our governance duties. That delegation, based on the Academy Trust Handbook, authorises that Committee lead for the Board on risk managements and to report to it. Specifically, it requires the Committee to:

- maintain oversight of the trust's risk register;
- direct the trust's programme of internal scrutiny; and to
- to provide assurance to the Board on the trust's risk management arrangements.

The terms of reference for the Audit and Risk Committee can be found in appendix A. The Risk Register is a standing item on the Audit and Risk committee's agenda and they will monitor the identification and mitigation of risk within the Trust and the Academies within in. The Audit and Risk committee's review of the Risk Register forms part of that committee's report to the Board of Trustees. The Board itself considers the reports of the Audit & Risk Committee and at least annually undertakes a review of both the Trust Risk Register and the high-level Academy Risk.

The role of the Chief Operating Officer

The Chief Operating Officer has day to day responsibility for managing risk. This responsibility includes:

- Monitoring the performance of risk management processes (including those processes within the Academy Schools)
- Ensuring that appropriate controls are in place to manage identified risks
- Routinely reporting to Audit and Risk Committee on the significant issues arising from carrying her day to day responsibilities.

Overarching the role of both the Audit & Risk Committee and the Chief Operating Officer, the CEO, Deputy CEO and Heads of Areas each have a role as part of their generic responsibilities to take due account of the risk management implications of every sphere of activity which they manage. This will include helping to embed risk management in the Trust's culture by ensuring that their staff are aware of their contribution to the risk management arrangements.

The role of each Academy

Individual schools within the Trust are responsible for managing the schools risk and complete their own risk assessments as part of the Academy Review Process. The Trust will maintain an overarching risk register summarising the main risks to all of its member academies. This is summarised in the School Improvement Handbook.

The Risk Register has been re-written (2021) to reflect the new OFSTED framework, the new requirements within DCAT finance handbook and consultation with Head Teachers, Trustees and Governors. It will be subject to a further period of consultation but this Risk Register will be used to determine where a school has strengths and areas for development for the academic year September 21/22. The 'Point in Time Risk Assessment' (POINTER) aims to capture a school's direction of travel. One of the key functions of the Senior Education Lead will be to work with schools to improve areas of weakness identified on the Risk Register and POINTER. A copy of the risk assessment can be found in appendix B.

The Academy Risk Register will be formally reviewed as part of the Academy Improvement Review meetings, led by the Deputy CEO and attended by the Headteacher, Chair of LGB and Lead Trustee for the school. These meetings are held at least annually.

The Assessment of Risk, Managing Risk and the Risk Register

Once a risk or a potential risk has been identified, in order to manage it is necessary to assess the scale of the threat it poses. Critically, that assessment considers the likelihood of the risk materialising and the potential impact if it does. To sharpen the focus of that assessment we quantify the likelihood and impact of each risk using a five-point scale (commonly referred to as the 5x5 matrix) as illustrated below:

			Likelihood Very low **1**	Low **2**	Medium **3**	High **4**	Very high **5**
Impact	Insignificant	**1**	1	2	3	4	5
	Minor	**2**	2	4	6	8	10
	Moderate	**3**	3	6	9	12	15
	Serious	**4**	4	8	12	16	20
	Very serious	**5**	5	10	15	20	25

The following gives a more detailed definition of what each point on the scale means in terms of likelihood and impact

Impact	Description	Likelihood	Description
5 Very Serious	The financial impact will be very serious [in excess of £40,000] Has a very serious impact on the strategy or on teaching and learning. Has very serious stakeholder concern.	5 Very High	81-100% - will almost certainly occur within 12 months.
4 Serious	The financial impact will be serious [between £20,000 and £40,000] Has a serious impact on the strategy or on teaching and learning. Has serious stakeholder concern.	4 High	51-80% - more likely to occur than not
3 Moderate	The financial impact will be moderate [between £10,000 and £20,000] Has a moderate impact on the strategy or on teaching and learning. Has moderate stakeholder concern.	3 Medium	21-50% - fairly likely to occur
2 Minor	The financial impact will be minor [between £5,000 and £10,000] Has no more than a minor impact on strategy or on teaching and learning Minor stakeholder concern	2 Low	6-20% - low but not impossible.
1 Insignificant	The financial impact is likely to be insignificant [below £5,000] Has an insignificant impact on strategy or on teaching and learning Insignificant stakeholder concern	1 Very Low	0-5% - extremely unlikely or virtually impossible. Will occur almost never.

Using the 5x5 matrix we are able to establish a hierarchy of risks and thereby a set of priorities to manage. We collate and present the risks, summarising their nature and outcome of the assessment of each in the Risk Register. It is important to stress that a Risk Register is a summative report of the outcome of the five-step process of risk identification, assessments, management, monitoring and reporting. It is designed to provide a simplified way of representing the risks and the action taken to manage them. A consideration of the register alone cannot be a substitute for the more exhaustive, in-depth analysis of the threats the trust faces. Nevertheless, the Risk Register is a very helpful too which assists all those with formal risk management responsibilities to focus some discussion particularly for governance purposes.

Once the risks have been identified and assessed, the next stage of the risk management strategy is to determine how best to manage each risk. Our approach to managing risk follows the 'four Ts approach', with 'take advantage' added, in which each risk is managed in one of five ways. A risk will be:

- **Tolerated:** where no action is taken. This may be because the cost of instituting controls is not cost-effective or the risk or impact is so low that they are considered acceptable.

- **Treated:** where a risk is controlled with actions to minimise the likelihood of occurrence or impact. There may also be contingency measures to reduce impact if it does occur.

- **Transferred:** where a risk is managed by the use of insurance or payment to third parties willing to take on the risk themselves (for instance, through outsourcing).

- **Terminated:** where a risk is ended or removed if this can be done without materially affecting operations. Alternatively, if a risk is ranked highly and the other potential control measures are too expensive or otherwise impractical, the rational decision may well be that this is a process the academy trust should not be performing at all.

- **Take Advantage**: where a risk offers opportunities as well as threats.

Managing risks will be principally based on the assessment of likelihood and impact, and on the resource implications of the options for managing each risk. Having identified, assessed and decided how to manage a risk, the fourth stage of the risk management arrangements is reached, which is to monitor.

Monitoring, recording and reporting risk

Risk management cannot be a 'one off' event because most risks and the contexts in which they appear are likely to change, just as resource availability might be. Therefore, risk management must be a dynamic, continuous process not a 'one off' intervention. This doesn't mean that each risk is constantly reassessed in a formal sense but that the process of assessment is on-going, part of the wept and warp of generic line management. Monitoring risks is a generic part of good line management practice. And as well as monitoring identified risks, it involves identifying potential new ones. So, the risk management process itself cannot be static but itself dynamic.

Monitoring should be ongoing and continuous as this supports the Trust's understanding of whether and how the risk profile is changing. Monitoring also provides assurance on the extent to which the mitigating actions and controls are operating as intended and whether risks are being managed to an acceptable level.

The risk register is central to risk monitoring. As risks are identified, they should be logged on the register and the associated control measures documented. A risk register should be a 'live document' and should be an on-going process. The Risk Register includes the following elements:

- **Risk category** – risk should be categorised under, for example, IT, finance, HR, premises to facilitate their effective management. Categorisation helps tease out other likely risks as well as potential duplication.
- **Risk description** – a brief description of the potential risk, namely the event itself, for example "a cyber-attack on the trust's IT systems" and its consequences "students cannot access their saved work".
- **Risk ID** – a unique number used to identify and track the risk.
- **Business objective threatened** – a description of the relevant business objective that the risk would affect if it materialised.
- **The estimated likelihood that the risk will occur**. This could be scored H/M/L (as above) or using another method.
- **The estimated impact of the risk if it materialised**. This too should be scored or assessed.
- **The gross risk score -** this is the combined score of the estimated likelihood and impact, without control measures being implemented. It is also known as the inherent risk.
- **Control measures** – which of the risk treatment option(s) (the T's) have been opted for and the rationale for the decision. Also what the proposed actions are, including timescales for implementation and resources required.
- **The net risk score** – the risk that remains after control measures have been put in place. This is essentially a re-assessment of likelihood and impact assuming that control measures are in place. It is also known as the residual risk.

- **Risk ranking** – this is the overall level of the residual risk, it reflects its position on the risk matrix and, if appropriate, its "traffic light" rating. It may be helpful to use a series of arrows to indicate the direction of travel of the risk ranking after each review i.e. up, down or static.
- **Risk trigger** – what is the event that would trigger implementation of contingency plans?
- **Contingency plan** – an action plan to address the risk if it does materialise and what plans are in place to mitigate the risk. It is a requirement of the AFH (part 2) that the trust's management of risks must include contingency and business continuity planning.
- **Risk owner** – the person responsible for deciding whether the risk trigger needs to be activated and managing the control measures and contingency plans. This should always be in identifiable individual who will ensure effective communication where necessary.
- **Date of last review** – this is an indication of when the audit and risk committee or the board last reviewed the risk. It may be that the risk climate has changed, and the risk level is of a sufficient level that it can be retired from the register. A date supports regular monitoring of risk.
- **Current status of risk** – this should include any comments that will support the review of the risk at the appropriate time.
- **Risk retired date and rationale for retiring risk** – this is an important element as it is an audit of any risks that have been considered by Trustees and later retired with the rationale. These can be hidden from any live document, but should still be recorded.

The Audit and Risk Committee will receive the Risk Register at its meetings. The information should be clear and provide key information on the significant business risks. The information should support the Trust Board and the Audit and Risk committee to review the adequacy and effectiveness of internal controls, to reprioritise resources and improve controls and to identify emerging risks.

For this process to be effective it is important that the number of risks reported is appropriate to the trust's own circumstances and is a manageable number. If too many risks are reported the process may become more difficult to manage and may lose focus.

As part of the Trustees' report, which accompanies the audited financial statements, academy trusts are required to explain their principal risks and uncertainties and the plan for managing those risks.
The audit and risk committee is responsible for directing the academy trust's programme of internal scrutiny. The internal scrutiny function must focus on evaluating the suitability of, and level of compliance with, financial and non-financial controls, offering advice and insight to the board on how to address weaknesses in financial and non-financial controls and ensuring all categories of risk are being adequately identified, reported, and managed. The risk register also facilitates a rational risk-based approach for the internal scrutiny function's work programme and the risk register must be used as a reference point, as required by the AFH (part 3).

Trustees must stress test the controls and mitigating actions to ensure that they have been implemented and are effective. For example, trustees, or the internal scrutiny function, could ask their IT provider to produce their MIS backup data within contract time and quality requirements.

Appendix A: Terms of Reference – Audit and Risk Committee

- Audit & Resources committee_TOR_Nov222.docx

Appendix B: Academy Risk Register

Risk	Purple	Green	Amber	Red
Outcomes: During the impact of COVID-19 on Nationally available data this judgement will use DCAT returns.	▪ Outcomes for young people in terms of attainment &/or the progress they are making from KS1 to 2 or KS2 to 4 are above FFT 20. ▪ Taking into account cohort size & prior attainment DCAT returns are 15% above average when compared against similar DCAT schools. ▪ Data over a three-year period is consistently upward.	▪ Outcomes for young people in terms of attainment &/or the progress they are making from KS1 to 2 or KS2 to 4 are above FFT 50. ▪ Taking into account cohort size & prior attainment, DCAT returns are above average when compared against similar DCAT schools. ▪ Data over a one-year period is upward in all areas. ▪ Teaching is 100% Good for all staff who have been at the school longer than 6 months.	▪ Outcomes for young people in terms of attainment &/or the progress they are making from KS1 to 2 or KS2 to 4 are in line with FFT 50. ▪ Taking into account cohort size & prior attainment, DCAT returns are in line with (<15%) average when compared against similar DCAT schools. ▪ Data in the majority of areas over a one-year period is upward. ▪ Teaching is 80% Good for all staff who have been at the school longer than 6 months.	▪ Outcomes for young people in terms of attainment &/or the progress they are making from KS1 to 2 or KS2 to 4 are below FFT 60. ▪ Taking into account cohort size & prior attainment, DCAT returns are 15% below the average when compared against similar DCAT schools. ▪ The data trajectory is downwards &/or gives Trust leaders cause for concern. ▪ Teaching is less than 80% Good for all staff who have been at the school longer than 6 months OR there is unaddressed inadequate teaching.
School Leadership	▪ SLT members can clearly demonstrate high value impact within other DCAT school(s). ▪ DCAT staff survey returns are 10 % above the average in the majority of areas which must include wellbeing & CPD. ▪ Succession planning is clearly aligned to school three-year plan.	▪ All Senior Leaders on target to meet all PM targets. ▪ Internal & external monitoring shows SLT are accurate self-evaluators & have clear actions for progress. ▪ DCAT staff survey returns are in line with the average in all areas. ▪ There are clear succession plans for senior staff.	▪ Senior leaders on target to meet the majority of PM targets. ▪ DCAT staff survey returns are below average in CPD &/or Wellbeing. ▪ There are unclear or unactioned succession plans for school leadership.	▪ There are concerns over the performance of senior leaders within the individual academy. ▪ DCAT staff survey returns are below the average in the majority of areas. ▪ Succession planning has not been considered & or planned.
Governance:	▪ Annual Skills audit completed & shows areas of strengths that can be used in other DCAT schools. ▪ LGB can provide a model of support & challenge. ▪ Code of Conduct, Declaration of Interests & Governor checks completed for all Governors &	▪ Annual Skills audit completed & shows no areas of significant weakness. ▪ LGB provides appropriate levels of support & challenge. ▪ LGB is full & all statutory positions filled ▪ Code of Conduct, Declaration of Interests & Governor checks	▪ Annual Skills audit completed & shows areas of significant weakness. ▪ LGB has vacancies &/or statutory positions not filled. ▪ LGB requires training to provide appropriate levels of support & challenge. ▪ Code of Conduct,	▪ Annual skills audit not completed. ▪ LGB deemed unable to support, challenge & /or may be a barrier to securing school improvement. ▪ Code of Conduct, Declaration of Interests & Governor checks not completed. ▪ 3/6 or fewer DCAT Hub meetings attended.

Risk	Purple	Green	Amber	Red
	Chair (or representative) ▪ Chair attends all DCAT Hub meetings.	completed for all Governors. ▪ 5/6 DCAT Hub meetings attended.	Declaration of Interests & Governor checks completed for all Governors. ▪ 4/6 DCAT Hub meetings attended. ▪ (Consider levels of delegated authority)	▪ (Consider levels of delegated authority)
Staffing: (All staff)	▪ All staff, including support staff, have effective PM linked to a clear ADP that supports significant school improvement. ▪ Staff absence levels are better than National averages. ▪ School leaders have supported partner schools in the achievement of an optimised staffing structure.	▪ There are no unfilled staffing positions or positions filled by long term supply. ▪ Where staff performance is an issue there are clear plans in place to address those areas. ▪ The school complies with Statutory & DCAT employment policies. ▪ Staff absence levels are in line with National Averages. ▪ The staffing structure has been optimised in the best interests of pupils. ▪ The school is provided with effective HR support.	▪ Staffing positions are filled but may include a limited number of long-term supply solutions or temporary appointments in leadership positions. ▪ Staff absence levels are broadly in line with National Averages but show deterioration over time. ▪ The staffing structure has not been optimised however curriculum delivery may still be achieved.	▪ Staffing vacancies are impacting the quality of educational provision. The school does not use statutory & DCAT policies effectively to improve the quality of educational provision. ▪ Staff absence levels are impacting on the quality of educational performance. ▪ The staffing structure has not been optimised & curriculum delivery is not being achieved. ▪ The school is not provided with effective HR support.
Development & Strategic Planning	▪ The school has a three-year plan towards which it can clearly identify progress. ▪ Subject development plans for all curriculum areas link closely with the ADP.	▪ The SEF clearly identifies the current position of the school using a wide evidence base. ▪ The ADP clearly identifies actions to address areas for development. ▪ Subject development plans for English & Maths link closely with the ADP.	▪ The SEF has been completed but is not supported by a wide evidence base. ▪ The ADP milestones are not always met & the document is not used to drive school improvement. ▪ The SEF & ADP are not central to Governor & SLT actions.	▪ The SEF does not reflect current in-school priorities. ▪ There is no clear link between the SEF & the ADP. ▪ Subject development plans do not link closely the ADP.

Risk	Purple	Green	Amber	Red
Curriculum Development	▪ The curriculum enables all pupils regardless of starting points to achieve highly. ▪ Curriculum progression & links throughout the school are coherent. ▪ Curriculum leaders' model excellent practice in their own & other DCAT schools.	▪ Innovative curriculum change is apparent. ▪ Rigorous plans in place to develop English & Maths across all year groups. ▪ A detailed enrichment programme is comprehensive & exciting. ▪ Thorough Schemes of Work (SoW) have been completed, where relevant. ▪ Needs of all pupil groups are being met. ▪ There are clear plans for improving teaching & learning through CPD.	▪ A basic curriculum has been planned, but there is too much similarity with the 'predecessor school'. ▪ It is unclear how the quality of teaching & learning will be transformed & a concern that there will be little change. ▪ There are only limited changes to SoW, where relevant. ▪ The needs of all pupil groups have not been fully considered	▪ The curriculum does not meet the needs of current pupils. ▪ Subject leaders have not had sufficient development opportunities/are unable to effect change in their curriculum area. ▪ Outcomes show that the young people are not ready for their next stage in education.
Admissions Attendance	▪ Admissions & 1st choice preferences are in line/above PAN respectively. ▪ Attendance & PA are better than National Average over a sustained period.	▪ Admissions in line with PAN. ▪ Attendance & PA is in line with National Average for one year.	▪ Admissions are below PAN for one year OR there is a downward trend ▪ Attendance & PA is poorer than National Average but improving.	▪ Admissions are below PAN OR erratic over time OR there is a downward trend over time ▪ Attendance & PA is poorer than National Average with little or no improvement over time.
Pupil Safety: Safeguarding Behaviour Policy Bullying	▪ School Behaviour policy & practice enables young people to demonstrate high levels of self-control & respect.	▪ All safeguarding measures are in place & are effective. All Governors have passed DBS & Section 128 checks. ▪ Behaviour Policy is implemented by all staff. ▪ School Behaviour policy & practice creates a safe environment that supports good teaching & learning. ▪ Stakeholder voice confirms that the school deals effectively with Bullying in line with DCAT averages.	▪ Behaviour of young people is poor but the Behaviour Policy is being implemented by all staff & the trajectory is positive. ▪ Stakeholder voice confirms that the school is below DCAT averages for dealing with Bullying & the school has a clear plan to address these concerns.	▪ Questions around safeguarding arrangements remain &/or Safeguarding measures are not in place or ineffective. ▪ There is no Behaviour Policy/The Behaviour Policy is not being implemented by all staff. ▪ The school has received an unresolved Ofsted complaint about Bullying/Safeguarding. ▪ Stakeholder voice confirms the school is below DCAT averages for dealing with Bullying & has no plan to address these concerns.
Financial Planning & Viability	▪ The school has performed within 2% of its agreed budget for over a two-year period & continues to do so. ▪ It has a clearly costed three-	▪ The school is performing within 2% of its agreed budget. ▪ Budget setting clearly aligns with curriculum delivery in the interests of pupils.	▪ The school is performing within 2% & 5% of its agreed budget. ▪ The school holds reserves that are greater than 8% or	▪ The forecast position is more than 5% away from its agreed budget. ▪ There is a future deficit position & no agreed plans for recovery. ▪ The school has no reserves or

Risk	Purple	Green	Amber	Red
	year plan used to drive school improvement.	▪ Where there is a future deficit position there are clearly agreed plans for recovery. ▪ The school reserves are between 5% & 8% of its annual budget & where it is outside of these figures there is a clear agreed rationale. ▪ The school complies with the requirement of the DCAT Financial Handbook ▪ Financial Information is provided to the school in line with the requirements of the DCAT Financial Handbook.	less than 5% of its annual budget with no agreed rationale.	reserves greater than 10% of annual income with no clear rationale. ▪ The school does not comply with the requirement of the DCAT Financial ▪ Financial Information is not provided to the school in line with the requirements of the DCAT Financial Handbook.
Site & Buildings	▪ The environment contributes to educational & excellence & the wellbeing of the occupants. It can be used as a model for excellent practice.	▪ There are no apparent health & safety problems or unfunded capital pressures relating to the site OR there are minor health & safety problems or unfunded capital pressures relating to the site but it is anticipated these will be resolved.	▪ There are health & safety problems or unfunded capital pressures relating to the site which need to be addressed. ▪ The school environment has not been optimised for children's learning.	▪ There is a/are significant Health & Safety problem(s) or unfunded capital pressures relating to the site which are outstanding. ▪ Previous Health & Safety concerns have not been actioned.
Christian Distinctiveness	▪ Religious education & collective worship are of consistently high quality. ▪ The school is continually seeking innovative ways of promoting the spiritual dimension across the curriculum. ▪ There is clear evidence that a values-led curriculum is having a positive impact on generating high standards of behaviour & respect amongst pupils & adults.	▪ The Academy promotes high quality religious education & collective worship. ▪ Staff are becoming increasingly confident at promoting spiritual development across the whole curriculum. ▪ There is increased collaboration within the Trust & across the Diocese. ▪ Partnerships with parishes are strengthening through, for example, shared use of premises & expertise within the community.	▪ The academy has clear statements about their intention to admit pupils of all faiths & none & of all abilities & backgrounds. ▪ The academy has clear polices for religious education, collective worship & promoting the spiritual dimension of the curriculum.	▪ There is little or no evidence of engagement with the DBE or wider Church's vision for education