



QUALITY POLICY

TalkFIRST, as an integral part of the management of the business, commits to develop and implement appropriate quality management systems that address the following elements:

Quality Management

We commit to ensuring that we deliver a consistently high level of service throughout our business. We will do this by:

- Identifying our strengths and weaknesses using feedback
- Assessing our progress through internal audits
- Evaluating our systems using quality objectives and performance reviews
- Providing an ethos of continual improvement.

Responsibility

This policy standard is issued under the authority of our Project Manager and Board of Trustees. Responsibility for implementation of this policy is set out below.

- Responsibility for the achievement of this policy standards rests with the Board
- The Project Manager is responsible for implementing the policy standard, monitoring its implementation in everyday activities and reporting to the staff.
- All staff are responsible for the ownership and undertaking of their quality management functions in accordance with this policy standard and for its implementation within their working day.

Outcomes

For our current contract the following outcomes are being measured:

Project Outcome	Indicator	Level	Timescale
Outcome 1 – Children and young people participating in the project will experience strengthened family relationships, develop life skills and improve confidence and self-esteem.	Taking part in mediation/FGM means children/young people will experience improved family relationships through the process of positive communication and negotiation	54	By the end of year one
	Through developing a person-centred plan children/young people will have their individual needs met, improving	54	By the end of year 2

	confidence and self-esteem		
	Children/young people will demonstrate improved life skills as a result improved relationships and home life and developing better habits	50	By the end of the project
Outcome 2 – Children/young people will improved engagement in education and divert away from antisocial behaviour/crime leading to better long-term prospects	A result of participation in the project for children/young people will be diversion away from criminal or antisocial behaviour	50	By the end of year one
	Children/young people will engage better in education, improving their attainment	50	By the end of year two
Outcome 3 – Parents/carers will experience improved reduced anxiety and improved emotional wellbeing and provide a better standard of parental care and guidance	Improved parent/carer-child relationships will reduce parental anxiety and improved emotional wellbeing	71	By the end of year one
	Parents/carers will have improved relationships with and be better able to manage the behaviour of their children/young people	195	By the end of the project
Outcome 4 – Siblings and other family members will benefit from reduced anxiety and improved relationships leading to a more harmonious home-life	Siblings of referred young people will enjoy a more harmonious home-life, reducing likelihood of anxiety and disruptive behaviour	108	By the end of year one
	Family members (i.e. grandparents) will experience reduced anxiety and improved emotional wellbeing	130	By the end of the project

Monitoring

The above outcomes are monitored on a regular basis and evaluated each year (or in line with the funder's requirements).

The audit process includes measuring how many people worked with, their feedback and evaluation (see below), speaking to the school if they have made the referral etc as above.

Before meeting for mediation families are asked to complete the "Monitoring Change" form. This includes scoring their family out of 5 for the following:

- Relationships at home or between family members
- Education problems/issues at school
- Concerns about (possible) offending or antisocial behaviour
- How do you feel generally – taking into account worries, anxiety, confidence and general wellbeing?

The form is then completed again at the end of the support from TalkFIRST.

At the end of the first session and the end of the last session we also request families to complete a “What do you think?” feedback form about the support they have received. This includes scoring the support from happy, no reaction to unhappy on the following questions:

- Did you have the chance to say what you wanted to?
- Do you think things may get better as a result of the FGM/mediation?
- Following the mediation/FGM, what would you like to happen?
- Overall what did you think of the mediation/FGM?
- What was good about the mediation/FGM? What could we have done better?
- Anything else you would like to add?

This is used to monitor and evaluate the support we are providing to families.

Complaints

Any complaints are directed towards the Chair of the Board of Trustees and can be done in person, by telephone or in writing. Any complaint made verbally will be requesting in writing for our records.

The complainant will be asked for details of:

- What the complaint is about
- What happened and who was involved
- Where and when it happened
- What they expect or hope the outcome to be

The complaint will then be logged and initial contact will be made with the complainant within one working day. This will be investigating internally by the Chair of the Board and the complainant will receive a formal response within seven days.

Any complaint is entered into our Continual Improvement log and is seen as a positive way to highlight any shortcomings and areas of improvement.

Quality Processes

Monitoring Change – Before the initial meeting families are asked to complete the “Monitoring Change” form.

Initial Meeting – We have an initial consultation with a family to find out what they need so that we can tailor the support i.e. who will attend, where / when the mediation will take place or what resources would help a child to participate fully.

The mediator takes brief diary notes during the session including the date, what happened, what was agreed and any particular concerns.

As part of the session the mediator and the family write a plan which includes the issues, what has been agreed and timescales for when to achieve them.

The family are asked to complete a “What did you think?” feedback form at the end of the first session.

The family have 3-4 sessions over 6-8 months and discuss what has changed at the 2 hour session.

At the end of the final session families are asked to complete the “What did you think?” feedback form and also the “Monitoring Change” form to enable us to evaluate the outcomes.

Other Services

Mediation Training and Conflict Awareness Workshop (for schools) are delivered in line with Quality guidelines. The training process begins by working in consultation with the commissioning body and/or delegates; every effort to listen to any specific requirements and, in line with the course aims, work to meet those needs.

Delegates are asked to evaluate the courses at the end of the final session. Evaluation covers the content, resources, delivery and overall effectiveness.

Commissioning organisations and delegates are asked to comment further 6 months after the end of the training to identify in the longer term how the learning has been retained and utilised.

A money back guarantee is offered for any delegate or organisation who can evidence that the aims and objectives of the course are not met.

Quality Essentials

Staff Training

Appropriate training is provided to all those involved in the operation of the company to ensure a consistent level of quality for all of our clients. This training includes:

- Induction
- 3 day in house mediation course
- Safeguarding training
- Advocacy training.

Please see our Training Policy for full details of our policy.

New Staff

New staff members shadow an existing member of staff for 4 weeks, starting by co-mediating for 4 weeks and then taking the lead. This is monitored on an individual basis.

Supervision

Monthly supervision takes place on a one on one and group basis to ensure that the service is standardised across all families.

Our Project Manager has independent clinical supervision every month by a consultant. This includes reflecting on the processes, discussing how the support is progressing and the day to day running of the charity.

The Project Manager also meets with the Board of Trustees every 8 weeks to discuss outcomes, targets, funding and volunteers.

Appraisals

Staff appraisals are conducted on an annual basis and are supported by regular support and supervision sessions throughout the course of the year.

Staff appraisal records are kept in their personnel file and any training needs added to their individual training record.

Improvement

The results of outcomes, supervision, feedback forms and any complaints are discussed as part of the bi-monthly Board meetings.

All staff are actively encouraged to propose solutions to improve both the quality management system and the quality of service delivery within the business.

We review this policy on an annual basis and also after any significant changes within the business.

Name: Tracy Sheppard
Date: November 2020
Next review date: November 2021