



HM Prison &
Probation Service

Action Plan Submitted: 04 October 2022

A Response to the HM Inspectorate of Probation Inspection:

Probation Service West Midlands Region

Reports Published: 04 August 2022 and 18 August 2022

INTRODUCTION

Her Majesty's Inspectorate of Probation is the independent inspector of youth offending and probation services in England and Wales. It reports on the effectiveness of probation and youth offending service work with adults and children.

In response to the report, HMPPS/MoJ are required to draft a robust and timely action plan to address the recommendations. The action plan confirms whether recommendations are agreed, partly agreed or not agreed (see categorisations below). Where a recommendation is agreed or partly agreed, the action plan provides specific steps and actions to address these. Actions are clear, measurable, achievable and relevant with the owner and timescale of each step clearly identified. Action plans are published on the HMPPS website.

Term	Definition	Additional comment
Agreed	All of the recommendation is agreed with, can be achieved and is affordable.	The response should clearly explain how the recommendation will be achieved along with timescales. Actions should be as SMART (Specific, Measurable, Achievable, Realistic and Time-bound) as possible. Actions should be specific enough to be tracked for progress.
Partly Agreed	Only part of the recommendation is agreed with, is achievable, affordable and will be implemented. This might be because we cannot implement the whole recommendation because of commissioning, policy, operational or affordability reasons.	The response must state clearly which part of the recommendation will be implemented along with SMART actions and tracked for progress. There must be an explanation of why we cannot fully agree the recommendation - this must state clearly whether this is due to commissioning, policy, operational or affordability reasons.
Not Agreed	The recommendation is not agreed and will not be implemented. This might be because of commissioning, policy, operational or affordability reasons.	The response must clearly state the reasons why we have chosen this option. There must be an explanation of why we cannot agree the recommendation - this must state clearly whether this is due to commissioning, policy, operational or affordability reasons.

			<p>between the SPO and PP. Progress will be measured through tracking of management information on the number of sessions completed.</p> <ul style="list-style-type: none"> • The use of a Parole Quality Assurance Tool has commenced which will be utilised by managers on all Parole Reports by December 2022 to assure and discuss with report authors the quality of the report, including risk assessment and proposed sentence plan. The use of the tool and the assessed quality from its use will be monitored on a monthly basis through management information and reported back to the PDU Head and Deputy Head. • The Regional Case Audit Tool (RCAT) will be used by SPOs and/or Quality Development Officers to audit one case per officer by next June 2023, in addition to its use as part of SAQA process for one case per officer. The results of this RCAT will then be used to give feedback to practitioners on their risk practice and areas for improvement and to identify PDU wide themes to inform quality improvement work. • The PDU will implement the MAPPAs level 1 policy framework (routine risk management) to enhance the regular monitoring and review of MAPPAs level 1 cases. The PDU will ensure all MAPPAs cases have the level set and information exchanged on the relevant screening form. The PDU will achieve 90% completion rate by 31/12/2022. Progress on this will be monitored through the use of management information data on MAPPAs screenings and level setting. • The PDU will ensure that safeguarding and domestic abuse checks are undertaken on all relevant cases in line with the safeguarding policy expectation and that the information is being used to inform risk assessment. This 	<p>PDU Head</p> <p>PDU Head</p> <p>PDU Head</p> <p>PDU Head</p>	<p>December 2022</p> <p>June 2023</p> <p>December 2022</p> <p>March 2023</p>
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			<p>lifer/IPP panels. The PDU Head will oversee ongoing monitoring of implementation through the use of the dashboard data on the areas outlined and provide quarterly updates to the Head of P&Q on their implementation of the model. Where progress is insufficient then this will be raised with the Head of Operations and the PDU Head for remedial action to be taken.</p> <ul style="list-style-type: none"> • Skills for Effective Engagement Development (SEEDs) Reflective Practice Supervision sessions (RPSS) have commenced and 6 will be completed by September 2023. These will be undertaken by line managers with all practitioners in line with national RPSS policy expectations of 6 RPSS sessions during a twelve-month period. These will facilitate reflective discussions and practice observations on the quality of risk management between the SPO and PP. Progress will be measured through tracking of management information on the number of sessions completed. • The use of a Parole Quality Assurance Tool has commenced which will be utilised by managers on all Parole Reports by December 2022 to assure and discuss with report authors the quality of the report, including risk assessment and proposed sentence plan. The use of the tool and the assessed quality from its use will be monitored on a monthly basis through management information and reported back to the PDU Head and Deputy Head. • The Regional Case Audit Tool (RCAT) will be used by SPOs and/or Quality Development Officers to audit one case per officer by next June 2023, in addition to its use as part of SAQA process. The results of this RCAT will provide oversight of the quality of the work and the results of this will then be used to give feedback to 	<p>PDU Head</p> <p>PDU Head</p> <p>PDU Head</p>	<p>September 2023</p> <p>December 2022</p> <p>June 2023</p>
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			practitioners on their risk practice and areas for improvement and provide oversight for the manager of the quality of work as evidenced by the audit outcome. Where further work is required the SPO will then undertake this through RPSS, touchpoint discussions and referrals to materials or support from a QDO.		
3	Engage with people on probation to inform service delivery	Agreed	<ul style="list-style-type: none"> The role of Peer Mentor provides the opportunity to enhance staff members' understanding of People on Probation (PoPs) and their lived experiences and to provide the opportunity for PoPs to influence service delivery. Staffordshire and Stoke PDU will re-establish Peer Mentors within Staffordshire. To achieve this, work will be undertaken to build understanding of the role of peer mentors, establish names to become peer mentors and then train them to undertake the role. Once completed the peer mentors will be allocated to offices throughout the PDU. The Offender Personality Disorder (OPD) pathway peer led focus groups have begun in Burton and Stoke. This group will action feedback from PoPs and link in with the short-term custody work. They have already started work on a leaflet to share with PoPs at the point of release about what to expect on licence. The work this group undertakes will be reviewed at the regional bi-monthly Engaging People on Probation (EPOP) single point of contact meeting and governance through the bi-monthly Programmes Board. Case studies and positive experiences of probation have been recorded by PoPs and will be shared in reception areas where there are TV screens and posters displayed in all offices for PoP's to view. This will promote the 	<p>PDU Head</p> <p>PD Lead/PDU Head</p> <p>EPOP Manager, Regional Communications Lead</p>	<p>January 2023 to have identified Peer Mentors and April 2023 for the peer mentors to be established in offices</p> <p>October 2022</p> <p>November 2022</p>

			<p>benefits of working alongside people with lived experience and create a positive culture in doing so.</p> <ul style="list-style-type: none"> • Focus groups will be held in Staffordshire and co-ordinated with Peer Mentor(s) to source feedback from PoPs on how better to engage PoPs with their sentence planning. Feedback will be compiled and shared with PDU SPO's at the managers meeting. • Staffordshire and Stoke PDU will conduct a PoP 'Your Voice Matters Survey' in November 2022. The results will be collated nationally, and once local data is available priorities will be identified from this to inform practice and service delivery. • A process will be established to monitor how feedback is provided to PoPs when changes are being instigated as a response to their feedback (from surveys, forums or via the suggestion box). • SPOs/Probation Practitioners will attend a workshop delivered by QDOs on sentence planning and delivery which will emphasise the importance of completing the Self-Assessment Questionnaire (SAQ) and incorporating the PoP's views when writing, reviewing and delivering the sentence plan. Progress will be measured through OASys countersigning, RCAT audit of one case per officer and SAQA case audit of one case per officer which assesses the PoP involvement in the delivery of the sentence. 	<p>EPOP Manager, Peer Mentor Co-ordinator</p> <p>PDU Head</p> <p>PDU Head</p> <p>PDU Head</p>	<p>January 2023</p> <p>February 2023</p> <p>January 2023</p> <p>March 2023</p>
4	Improve local arrangements to	Agreed	<ul style="list-style-type: none"> • To monitor Equality and Diversity Performance Data, PDU managers have received a briefing and 		Completed

			current services for PoPs from black, Asian and minority ethnic backgrounds available within the PDU and commission or develop services to meet areas of unmet need. Progress will be monitored through the regional equality, diversity and inclusion governance board.		
5	Ensure that the interventions necessary to improve desistance and reduce reoffending and risk of harm are provided and accessed in all cases.	Agreed	<ul style="list-style-type: none"> The region will form a Demand Management Board to assess the future need of caseload to understand volume and types of interventions required within the PDUs. This will meet six-weekly and will use the interventions dashboard to assess need across all required interventions and commission new interventions or increase the availability of others as part of ongoing forecasting. The Board will ensure that the needs of those who identify themselves as being from black, Asian, minority ethnic groups are specifically met Ensure that referral and start data from case recording systems is used within the PDU to examine issues and increase the start rate of Commissioned Rehabilitative Services by 20% from 2022 Q1 (April-June) levels by March 2023. The PDU will use a spreadsheet tracker to identify Unpaid Work requirements are either being instructed for work or appropriate action is being taken to ensure the intervention is being used as required to address desistance, reduce reoffending and harm in all relevant cases. The Regional Programmes Team will develop reports to improve the accuracy of recording and analysis of Programmes and Structured Interventions data to enable 	<p>Head of Operations</p> <p>Head of Community Integration</p> <p>Head of Operations</p> <p>Head of Interventions</p>	<p>December 2022</p> <p>March 2023</p> <p>December 2022</p> <p>December 2022</p>

			<p>monitoring of uptake and delivery which will be then shared in review meetings at a PDU level.</p> <ul style="list-style-type: none"> The use of nationally approved probation practitioner toolkits will be increased by 20% over the next six months to improve desistance. The toolkits are intended to support the change activity, addressing needs and supporting PoP to refrain from behaviour linked to offending. The usage data to track progress will come from the caseload and interventions dashboard so improvements will be tracked at a PDU level. 	Head of Operations	April 2023
Birmingham North, East and Solihull PDU should:					
1	Urgently review the quality of practice in all cases affected by the structural alignment	Partly agreed	<p>This recommendation is partly agreed as the structural alignment involved over 4000 cases across Birmingham which is the majority of the caseload in the two Birmingham PDUs and took place seven months ago and in that time cases have completed, new cases have begun and therefore any review needs to encompass all cases within the PDU as part of wider quality improvement work as the practice issues identified cannot solely be linked to structural alignment. There are however some specific actions outlined below that will take place across the Birmingham North, East & Solihull caseload that will provide assurance on key aspects of risk management, in addition to the wider quality improvement work outlined in this action plan.</p> <ul style="list-style-type: none"> To ensure that all active events have a current OASys initial sentence plan (ISP) the PDU will utilise a management information report to identify cases without a current ISP and those with an incomplete or “guillotined” OASys Initial Sentence Plans (ISP). The 	Head of PDU	November 2022

			<p>PDU will then manually reconcile management information regarding the ISP backlog from Delius and OASys to check for accuracy. This information will then be used to ensure completion of any outstanding ISPs. Progress to be measured by Head of PDU through the management information report on ISP completion to ensure all cases have a current ISP with action plans put in place to agree completion where an ISP is outstanding.</p> <ul style="list-style-type: none"> The PDU will utilise management information on contacts to ensure that cases are having contact in line with expectations under the probation prioritisation framework. The SPO will take action where cases are identified that have not been seen. This to be monitored by the Head of PDU on a monthly basis through management information detailing date of last contact. 	Head of PDU	November 2022
2	Improve the quality of work to assess, plan, manage and review risk of harm	Agreed	<ul style="list-style-type: none"> All Senior Probation Officers (SPOs)/Probation Practitioners (PPs) will attend risk assessment and risk management workshops led by the Quality Development Officers (QDOs) by December 2022. These will provide input designed to raise the quality of practice regarding risk assessment and management, including professional curiosity. Attendance will be monitored by the Probation Delivery Unit (PDU) to ensure all practitioners have attended as required. The impact of the workshops to be measured through the Regional Case Audit Tool (RCAT) audit, OASys countersigning and reflective supervision all of which assess the quality of practice, as detailed within this action plan. 	PDU Head	December 2022

			<ul style="list-style-type: none"> SPOs will use a monthly team meeting to promote the practice guidance documents and materials stored on the regional quality OneNote. These materials cover risk assessment, risk management and sentence planning and are designed to assist practitioners understand and improve the quality of their practice. Completion will be reported back to Head of PDU at team meeting to be reported back to Head of PDU by the SPO, who will record compliance with the action. The impact of the materials will be measured through the RCAT audit, OASys countersigning and reflective supervision all of which assess the quality of practice, as detailed within this action plan. 	PDU Head	January 2023
			<ul style="list-style-type: none"> Alongside other quality development activities listed in the plan, Self-Assessed Quality Assurance (SAQA) activity has already commenced, and each probation practitioner (PP) will undertake a self-audit of one of their cases chosen in conjunction with the SPO by November 2023 and yearly thereafter. The PP and the SPO will work together to audit the case, discussing the practice and reflecting on the management of the case to support reflective practice and quality development of officers. The operation of the process will be monitored within the PDU by the SPO and local leads and progress reported to the PDU Head who will ensure that all probation practitioners have had a case assessed through SAQA. The results of the SAQA will be discussed between the SPO and Practitioner with areas for improvement noted and followed up with additional activity such as RCAT, OASys countersigning and supervision discussions. The results from the SAQA audits will be shared with the PDU Heads and Deputies to ensure practice development themes are highlighted and further action taken to support practice e.g. briefings where required. 	PDU Head	November 2023

			<ul style="list-style-type: none"> • The use of a Parole Quality Assurance Tool has commenced which will be utilised by managers on all Parole Reports by December 2022 to assure and discuss with report authors the quality of the report, including risk assessment and proposed sentence plan. The use of the tool and the assessed quality from its use will be monitored on a monthly basis through management information and reported back to the PDU Head and Deputy Head. 	PDU Head	December 2022
			<ul style="list-style-type: none"> • The Regional Case Audit Tool (RCAT) will be used by SPOs and/or Quality Development Officers to audit one case per officer by next June 2023, in addition to its use as part of SAQA process. The results of this RCAT will then be used to give feedback to practitioners on their risk practice and areas for improvement and to identify PDU wide themes to inform quality improvement work. 	PDU Head	June 2023
			<ul style="list-style-type: none"> • The PDU will implement the MAPPa level 1 policy framework to enhance the regular monitoring and review of MAPPa level 1 cases. The PDU will ensure all MAPPa cases have the level set and information exchanged on the relevant screening form. The PDU will achieve 90% completion rate by 31/12/2022. Progress on this will be monitored through the use of management information data on MAPPa screenings and level setting. 	PDU Head	December 2022
			<ul style="list-style-type: none"> • The PDU will ensure that safeguarding and domestic abuse checks are undertaken on all relevant cases in line with the safeguarding policy expectation and that the information is being used to inform risk assessment. This will be monitored through management information which records whether a check has been sent on all relevant cases, with the detail shared with the PDU Head, Deputy and SPOs through the Performance OneNote. They will then follow up on any cases where 	PDU Head	March 2023

			<p>insufficient then this will be raised with the Head of Operations and the PDU Head for remedial action to be taken.</p> <ul style="list-style-type: none"> The use of a Parole Quality Assurance Tool has commenced which will be utilised by managers on all Parole Reports by December 2022 to assure and discuss with report authors the quality of the report, including risk assessment and proposed sentence plan. The use of the tool and the assessed quality from its use will be monitored on a monthly basis through management information and reported back to the PDU Head and Deputy Head. The Regional Case Audit Tool (RCAT) will be used by SPOs and/or Quality Development Officers to audit one case per officer by next June 2023, in addition to its use as part of SAQA process. The results of this RCAT will provide oversight of the quality of the work and the results of this will then be used to give feedback to practitioners on their risk practice and areas for improvement and provide oversight for the manager of the quality of work as evidenced by the audit outcome. Where further work is required the SPO will then undertake this through RPSS, touchpoint discussions and referrals to materials or support from a QDO. 	<p>PDU Head</p> <p>PDU Head</p>	<p>December 2022</p> <p>June 2023</p>
4	Ensure that all operational staff undertake safeguarding and domestic abuse training	Agreed	<ul style="list-style-type: none"> PDU Heads and Business Managers (BMs) are sent a monthly report detailing which staff have completed safeguarding and domestic abuse e-learning with accompanying dashboard. Through supervision SPOs set a date for completion. If there is persistent non-completion without good reason it is addressed through performance management. 	Probation Learning Lead/PDU Head	Complete

			<ul style="list-style-type: none"> • The PDU Head will ensure all practitioners have completed on-line adult safeguarding, children's safeguarding and domestic abuse training in the last three years through the utilisation of the monthly report provided by the regional learning lead. Progress will be monitored through the PDU management group and updated monthly report. • The PDU Head will ensure all practitioners have completed face to face adult and children's safeguarding training in the last three years through the utilisation of the monthly report provided by the regional learning lead. Progress will be monitored through the PDU management group and updated monthly report. • The PDU will liaise with the Regional Learning Team to request additional courses from the central Learning Services Delivery team where there is insufficient availability. • PDU to maintain register of adult and children's safeguarding training expiry dates to ensure training remains valid 	PDU Head	November 2022
				PDU Head	March 2023
				PDU Head/Regional Learning Lead	November 2022
				PDU Head	October 2022
5	Improve the quality of sentence management for women.	Agreed	<ul style="list-style-type: none"> • BNES staff will actively participate in the MOJ-sponsored project team to introduce a Women's Problem Solving Court in Birmingham to enhance the experience of women in the criminal justice system. • BNES women's SPO lead will work with CRS providers to increase opportunities for women on probation to report to women-specific environments 	PDU Head	July 2023
				Head of PDU	January 2023

			<ul style="list-style-type: none"> • The PDU will develop and implement a women's specialist Probation response across the region (specialist team or semi-specialist team) 	Head of PDU/Regional Strategic Lead for Women	March 2023
			<ul style="list-style-type: none"> • West Midlands Regional SPO lead for women will organise and deliver briefings to the Women's Lead SPOs to ensure they are aware of the content of the new toolkit for women and are able to use to improve the quality of sentence management for women. 	Regional Strategic lead for Women	March 2023
			<ul style="list-style-type: none"> • The Women's lead SPO will deliver a team meeting briefing for all practitioners who hold female people on probation on their caseload to ensure they are aware of the content of the new toolkit for women. To monitor use the West Midlands Women's SPO lead will undertake 2 case audits per PDU to review the quality of case management, check on the use of the toolkits and identify key themes for further development. 	Women's Lead SPO	April 2023
			<ul style="list-style-type: none"> • A further audit of two cases per PDU will then be undertaken within the next 6 months to assess the impact of the briefings and guidance developed and delivered above. 	Women's Lead SPO	October 2023
			<ul style="list-style-type: none"> • The West Midlands Women's Lead SPO will deliver the trauma informed training module to all report authors in the PDU to enhance the quality of practice in their engagement with women 	Women's Lead SPO	April 2023
			<ul style="list-style-type: none"> • The West Midlands Women's Lead SPO will deliver a briefing on suitable sentencing options for women to all report authors. 	Women's Lead SPO	January 2023

			<ul style="list-style-type: none"> The West Midlands Regional Deputy Head Lead for Women, the Women's Lead SPO and the Resettlement Manager will meet and develop a briefing pack for all practitioners managing female people on probation with regard to resettlement and the short term sentence function for women. 	Women's Lead SPO	January 2023
Warwickshire PDU should:					
1	Ensure existing information sharing arrangements are utilised fully to support the overall management of risk	Agreed	<ul style="list-style-type: none"> In order to increase the information sharing capacity of and increase information flow throughout supervision, Warwickshire PDU will appoint, vet and train a further Domestic Abuse Case Administrator, plus arrange cover for added resilience to ensure the arrangements are robust and fully utilised. 	Head of PDU	November 2022
			<ul style="list-style-type: none"> Warwickshire Business Manager will arrange an IT package and full training to be delivered by Warwickshire Police so that the postholder(s) are trained and accredited to access Police DA call out information to enable information sharing arrangements to be enhanced. 	Head of PDU	December 2022
			<ul style="list-style-type: none"> All Warwickshire Probation Practitioners will attend mandatory briefings on the case information available in relation to Domestic Abuse (through the Domestic Abuse Administrator posts) and Child Safeguarding checks (through the MASH). The briefings will cover the practice expectations for commencement, review, change of circumstances and professional curiosity checks. Attendance will be recorded to ensure all practitioners attend. 	Deputy Head of PDU	January 2023

			<ul style="list-style-type: none"> An Implementation and Assurance review will be conducted in Warwickshire to assess the implementation and use of the arrangements briefed to staff in the actions above. Each practitioner will have 10% of their cases sampled to ensure domestic abuse and safeguarding checks are occurring for the purposes of review, change of circumstances and professional curiosity. The Head of PDU and Deputy Head of PDU will then establish an ongoing information monitoring process to check volumes of checks being made and, where necessary, put in place remedial action. This will be managed through the 6 weekly PDU Quality Assurance Meetings which all managers attend. This will be sequenced after actions 1,2 and 3 above and will therefore commence in May 2023. 	Deputy Head of PDU	April 2023
				Head of PDU/Deputy Head	May 2023
2	Improve the quality of work to assess, plan, manage and review risk of harm	Agreed	<ul style="list-style-type: none"> All Senior Probation Officers (SPOs)/Probation Practitioners (PPs) will attend risk assessment and risk management workshops led by the Quality Development Officers (QDOs) by December 2022. These will provide input designed to raise the quality of practice regarding risk assessment and management, including professional curiosity. Attendance will be monitored by the Probation Delivery Unit (PDU) to ensure all practitioners have attended as required. The impact of the workshops to be measured through the Regional Case Audit Tool (RCAT) audit, OASys countersigning and reflective supervision all of which assess the quality of practice, as detailed within this action plan. 	PDU Head	December 2022

			<ul style="list-style-type: none"> SPOs will use a monthly team meeting to promote the practice guidance documents and materials stored on the regional quality OneNote. These materials cover risk assessment, risk management and sentence planning and are designed to assist practitioners understand and improve the quality of their practice. Completion of the input at team meeting to be reported back to Head of PDU by the SPO, who will record compliance with the action. The impact of the materials will be measured through the RCAT audit, OASys countersigning and reflective supervision all of which assess the quality of practice, as detailed within this action plan. 	PDU Head	January 2023
			<ul style="list-style-type: none"> Alongside other quality development activities listed in the plan, Self-Assessed Quality Assurance (SAQA) activity has already commenced, and each probation practitioner (PP) will undertake a self-audit of one of their cases chosen in conjunction with the SPO by November 2023 and yearly thereafter. The PP and the SPO will work together to audit the case, discussing the practice and reflecting on the management of the case to support reflective practice and quality development of officers. The operation of the process will be monitored within the PDU by the SPO and local leads and progress reported to the PDU Head who will ensure that all probation practitioners have had a case assessed through SAQA. The results of the SAQA will be discussed between the SPO and Practitioner with areas for improvement noted and followed up with additional activity such as RCAT, OASys countersigning and supervision discussions. The results from the SAQA audits will be shared with the PDU Heads and Deputies to ensure practice development themes are highlighted and further action taken to support practice e.g. briefings where required. 	PDU Head	November 2023

			<ul style="list-style-type: none"> Skills for Effective Engagement Development (SEEDs) Reflective Practice Supervision sessions (RPSS) have commenced and 6 will be completed by September 2023. These will be undertaken by line managers with all practitioners in line with national RPSS policy expectations of 6 RPSS sessions during a twelve-month period. These will facilitate reflective discussions and practice observations on the quality of risk management between the SPO and PP. Progress will be measured through tracking of management information on the number of sessions completed. 	PDU Head	September 2023
			<ul style="list-style-type: none"> The use of a Parole Quality Assurance Tool has commenced which will be utilised by managers on all Parole Reports by December 2022 to assure and discuss with report authors the quality of the report, including risk assessment and proposed sentence plan. The use of the tool and the assessed quality from its use will be monitored on a monthly basis through management information and reported back to the PDU Head and Deputy Head. 	PDU Head	December 2022.
			<ul style="list-style-type: none"> The Regional Case Audit Tool (RCAT) will be used by SPOs and/or Quality Development Officers to audit one case per officer by next June 2023, in addition to its use as part of SAQA process. The results of this RCAT will then be used to give feedback to practitioners on their risk practice and areas for improvement and to identify PDU wide themes to inform quality improvement work. 	PDU Head	June 2023
			<ul style="list-style-type: none"> The PDU will implement the MAPPa level 1 (routine risk management) policy framework to enhance the regular monitoring and review of MAPPa level 1 cases. The PDU will ensure all MAPPa cases have the level set and information exchanged on the relevant screening form. The PDU will achieve 90% completion rate by 	PDU Head	December 2022

			<p>31/12/2022. Progress on this will be monitored through the use of management information data on MAPPA screenings and level setting.</p> <ul style="list-style-type: none"> The PDU will ensure that safeguarding and domestic abuse checks are undertaken on all relevant cases in line with the safeguarding policy expectation and that the information is being used to inform risk assessment. This will be monitored through management information which records whether a check has been sent on all relevant cases, with the detail shared with the PDU Head, Deputy and SPOs through the Performance OneNote. They will then follow up on any cases where the check is outstanding. The use of the information to inform risk assessments and risk management will be monitored qualitatively through OASys countersigning, touchpoint discussions such as initial case discussion, parole, risk reviews and RCAT/SAQA auditing of cases which looks at the quality of risk information and practice. 	PDU Head	March 2023
3	Improve the effectiveness of management oversight and quality assurance of all casework	Agreed	<ul style="list-style-type: none"> A new national OASys Countersigning Framework is in use and will be fully embedded by October 2022 to provide consistency in OASys countersigning expectations for SPOs and PPs and set quality standards to be obtained before officers achieve approved status which reduces the number of assessments to be countersigned by the SPO. The PDU will ensure that all PPs not at approved status have increased levels of countersigning by the SPO in line with the framework and receive feedback on each assessment to understand areas for improvement. Where required, this will be supplemented by input from a QDO or guidance documents to enhance understanding of practice requirements. 	PDU Head	October 2022

			<ul style="list-style-type: none"> • Touchpoint Model expectations for management oversight will be fully embedded within the PDU by April 2023. Progress in implementation will be measured through management information which will track the management oversight undertaken at different points during the course of a sentence including pre-release discussions, initial case discussions, parole reports, lifer/IPP panels. The PDU Head will oversee ongoing monitoring of implementation through the use of the dashboard data on the areas outlined and provide quarterly updates to the Head of P&Q on their implementation of the model. Where progress is insufficient then this will be raised with the Head of Operations and the PDU Head for remedial action to be taken. 	PDU Head	April 2023
			<ul style="list-style-type: none"> • Skills for Effective Engagement Development (SEEDs) Reflective Practice Supervision sessions (RPSS) have commenced and 6 will be completed by September 2023. These will be undertaken by line managers with all practitioners in line with national RPSS policy expectations of 6 RPSS sessions during a twelve-month period. These will facilitate reflective discussions and practice observations on the quality of risk management between the SPO and PP. Progress will be measured through tracking of management information on the number of sessions completed. 	PDU Head	September 2023
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4	Enhance understanding by probation practitioners of how CRS provision supports their work with people on probation.	Agreed	<ul style="list-style-type: none"> Warwickshire PDU will utilise the CRS dashboard showing the volume of referrals and starts each month within the 6 weekly PDU quality assurance meetings to examine the use of services and put in place individual input to those probation practitioners who are not regularly referring into the CRS services. SPO champions will be established for each CRS service who will lead communications with practitioners within the PDU on the CRS services available, referral processes and benefits for PoPs. Numbers of referrals and starts will be tracked through the regional CRS dashboard. The case audit of RCAT and SAQA cases will be utilised to provide feedback to practitioners where CRS has been used positively or where opportunities for referral have been missed. The SPO CRS champion will hold bi-monthly meetings with CRS providers to review the referral data and operational processes to enhance partnership working 	Deputy Head of PDU	December 2022
				Head of PDU	October 2022
				Head of PDU	December 2022

			<p>approach and communications between providers and practitioners.</p> <ul style="list-style-type: none"> Warwickshire PDU will engage People on Probation referred to CRS and suppliers in jointly developing improvement initiatives where services are under-utilised. 	Head of Contracts	November 2022
7	Review the availability of reporting facilities within the Rugby area.	Not agreed	This recommendation is not agreed for Policy and Affordability reasons and a review of the facility requirements has already been completed within the past six months. The PDU completed a "Rurality and Dispersion Analysis" in March 2022 which was submitted in evidence to HMIP. The report demonstrated that all Rugby PoPs were within a 60 minute driving range of the Nuneaton reporting office. Only 1 Rugby PoP did not have access to Public Transport. 113 PoPs were within 60 minutes by Public Transport and 40 PoPs were within 90 minutes. There is already reporting facility within Rugby Police Station for IOM PoPs who have additional reporting requirements.		
The West Midlands Probation Service should:					
1	Ensure that management information in relation to commissioned rehabilitative services referrals is available for PDU managers and analysed effectively to increase the use of available services	Agreed	<ul style="list-style-type: none"> The West Midlands Probation Service (WMPS) will develop and maintain a regional CRS Dashboard showing the volume of referrals and starts commenced each month within the region. The Dashboard will be based on Refer and Monitor System data and will show assumed volumes of referrals and starts v actuals at a Region, PDU, team and practitioner level. PDU Heads and Deputies and their nominated managers will be given access to enable them to monitor and track progress. 	Head of Performance and Quality	November 2022

	<p>(Staffordshire & Stoke PDU).</p> <p>AND</p> <p>Ensure that management information in relation to CRS referrals is available for PDU managers and analysed effectively to increase the use of available services (Birmingham North East & Solihull PDU).</p> <p>AND</p> <p>Routinely share and analyse CRS referral data to support PDU delivery and engagement (Warkickshire PDU).</p>		<ul style="list-style-type: none"> • WMPS will develop and deliver a training package for PDU Heads/Deputies in the use of the dashboard and how to analyse the management information available to promote an increase in the number of referrals in line with PDU assumed volumes. • The WMPS Performance and Quality Team will track PDU volumes and circulate details to the Heads/Deputies on a (monthly basis) to provide regional oversight of the volume of referrals and starts as part of other performance data. • The WMPS Contract Management Team will conduct monthly and quarterly analysis of the volume of referral, starts and the timeliness of contractual obligations to ensure CRS Suppliers and Probation Practitioners are meeting their requirements. • The WMPS Contract Management Team will report performance and analysis findings to the Head of Operations (Interventions) and Head of Community Interventions at the monthly Regional Commissioning Governance Board Meeting and on a quarterly basis to the WMR Operational Leadership Team Meeting to enable review and decision making. 	<p>Head of Performance and Quality</p> <p>Head of Performance & Quality</p> <p>Head of Contracts/Head of Operations/ Head of Community Interventions</p> <p>Head of Community Integration</p>	<p>November 2022</p> <p>November 2022</p> <p>November 2022</p> <p>November 2022</p>
2	<p>Ensure that smarter working arrangements support effective communication and professional</p>	<p>Agreed</p>	<ul style="list-style-type: none"> • Business, Strategy & Change (BSC) will complete a quarterly report for the regional organisational leadership team (OLT) on PDU progress against the national smarter working toolkit to provide assurance of adherence to national expectations of smarter working. 	<p>Head of Operations</p>	<p>October 2022</p>

	<p>information exchange and access to services (Birmingham NE & Solihull PDU).</p> <p>AND</p> <p>Review, refer and monitor processes to promote effective information exchange between CRS providers and probation practitioners (Warwickshire PDU).</p>		<ul style="list-style-type: none"> • 'Right First Time' referral guidance will be made available to probation staff, supplemented by a video specifically focused on appropriate sharing of risk information within a CRS referral. • For the 12 West Midlands Region CRC contracts the West Midlands Probation Service Contract Management Team will dip sample 15 cases per contract per quarter (180 cases in total) to review quality and contractual compliance. 	<p>West Midlands Head of Contracts</p>	<p>October 2022</p> <p>Commence December 2022</p>
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