



Action Plan Submitted: 29 March 2019

A Response to the HMI Probation Inspection: Dorset, Devon and Cornwall
Community Rehabilitation Company

Report Published: 15 February 2019

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 HMI Probation website. Progress against the implementation and delivery of the action plans will be monitored by HMPPS/MoJ and reviewed annually by HMI Probation.

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.



ACTION PLAN: DDC CRC

1. Rec No	2. Recommendation	3. Agreed/ Partly Agreed/ Not Agreed	4. Response Action Taken/Planned	5. Responsible Owner (including named individuals and their functional role or department)	6. Target Date
Recommendations for Dorset, Devon and Cornwall CRC					
1.	Make clear to staff the importance and primacy of public protection work, provide adequate resources for public protection work and train all professional staff on the management of the risk of harm	Agreed	<p>Leadership - Dorset, Devon and Cornwall (DDC) CRC will:</p> <p>Run a leadership workshop event to refocus on the primary purposes of probation services – to protect the public and reduce offending.</p> <p>Training – DDC CRC will:</p> <p>Develop and implement a comprehensive, targeted training package for PSOs (Probation Services Officers) that are new to role or identified as requiring development.</p> <p>Undertake a training audit of all professional staff to establish priority locations/individuals requiring development across all key areas of case management particularly prioritising the areas of risk management and service user engagement. DDC CRC will Implement an individualised Development & Improvement Plan programme for staff where monthly case audits identify an insufficient level of risk monitoring and management of potential risk of harm.</p> <p>Risk Management and Risk Assessment Quality – DDC CRC will:</p> <p>Implement a targeted training and quality improvement work stream that focuses on quality of risk management during the sentence underpinned by a plan that explains what will be done to manage the service users' risks and needs.</p>	<p>Chief Executive, Kent Surrey and Sussex (KSS) CRC</p> <p>Justice Innovation Unit (JIU) Continuous Improvement Lead, South West(SW) Division</p> <p>JIU (Transitioning to KSS Excellence and</p>	<p>May 2019</p> <p>May 2019</p> <p>May 2019</p> <p>May 2019</p>



			<p>In the short-term continue monthly OASys (An Offender Assessment System) Quality Assurance dip sample that focuses on risk assessment and planning to ensure that all Case Managers follow the same consistent content when completing the initial Plan.</p> <p>In the medium term, Seetec, who operate Rehabilitation Services for Kent Surrey and Sussex (KSS) CRC and who have taken over implementation for DDC CRC, will implement the KSS CRC assessment system in the SW CRCs.</p> <p>Quality Assurance – DDC CRC will:</p> <p>Collaborate with KSS CRC Excellence and Effectiveness Directorate to support the implementation of a Quality Framework across DDC and Bristol, Gloucestershire, Somerset and Wiltshire CRC (BGSW) that is aligned with KSS CRC QA approach.</p> <p>Prioritise tasks that relate to the improvement of the management of risk of harm, service user engagement and compliance across all current actions plans (HMIP, HMPPS) and ensure that progress is being made in a timely manner. Local Delivery Unit (LDU) Heads will lead weekly performance calls, oversee and will be accountable for quality of case management in the LDUs and report progress of individual action and development plans.</p> <p>Implement regular peer review events that focus on good practice in relation to managing risk of harm and service user engagement. DDC CRC will involve Case Managers that are recognised by internal case audit as excellent practitioners as peer mentors for events involving DDC case management staff.</p>	<p>Effectiveness function)</p> <p>JIU (Transitioning to E&E)</p> <p>JIU(Transitioning to E&E)</p> <p>Continuous Improvement Lead, SW (Assistant Chief Probation Officer - E&E)</p> <p>Interim Chief Probation Officer (CPO), DDC</p> <p>Continuous Improvement Lead, SW</p>	<p>May 2019</p> <p>May 2019</p> <p>September 2019</p> <p>June 2019</p> <p>June 2019</p>
2.	Develop and deliver urgent remedial action for all aspects of Case Management	Agreed	<p>Enforcement of Community Orders/Licences – DDC CRC will:</p> <p>Ensure appropriate enforcement is taken when there has been a recorded failure to attend or comply by the use of daily enforcement reports and weekly performance calls with LDU heads.</p> <p>Training – DDC CRC will implement:</p>	<p>Interim CPO</p>	<p>May 2019</p>



		<p>Targeted training work streams on delivery of the sentence with emphasis on the recording of the rationale of enforcement decisions, addressing risk issues and the progress of sentence plans. Monthly targeted case audit will confirm improvements in case recording practice.</p> <p>Training events to improve case manager's (CMs) ability to secure service users (SU) engagement and compliance by focusing on how to ensure that protective factors are promoted during supervision and that CMs monitor and record the progress the SU is making against the sentence plan.</p> <p>Address Sentence Plan quality to ensure plans reflect the need to keep the public safe and reduce the likelihood of further offending. The training will also focus on potential barriers to compliance, protected characteristics and motivation.</p> <p>Ensure that the frequency of contact arranged between the Case Manager (CM) and the service user is in line with risk levels identified by OASys assessment and BRAG (Blue, Red, Amber Green progress reviewing system) with the quality team completing monthly reviews using the Case Management Quality Tool and team managers undertaking monthly case audits that also checks the BRAG alignment with OASys risk level.</p> <p>Incorporate appointment quality as a key area of development for case managers that have been identified via monthly audits as requiring improvement/development actions.</p> <p>Focus on quality of service user's assessment of needs to ensure that assessments are not 'pulled through' from a previous assessment and not updated.</p> <p>Rehabilitation Activity Requirement (RAR) – DDC CRC will:</p> <p>Ensure that RAR days are delivered and their content is rehabilitative and that there is, at any time, an appropriate range of RAR interventions available to service users by undertaking a review of the SW Divisions RARs to align with KSS CRC model.</p> <p>Implementing a recruitment plan to reduce case managers caseload to allow more time for one to one RAR delivery and review interventions resource in order to increase one-to-one RAR delivery</p>	<p>Learning and Development Lead (L&D), SW</p> <p>L&D Lead</p> <p>L&D Lead</p> <p>JIU</p> <p>JIU</p> <p>JIU</p> <p>Interventions, SW</p> <p>Interventions, SW</p>	<p>May 2019</p> <p>May 2019</p> <p>May 2019</p> <p>May 2019</p> <p>May 2019</p> <p>May 2019</p> <p>April 2019</p> <p>April 2019</p>
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			<p>Implementing KSS CRC Rehabilitation/Probation Officer caseload guidance/workload model to facilitate one to one RAR delivery.</p> <p>OASys Assessments – DDC CRC will deliver:</p> <p>An assessment of criminogenic needs is completed in all required cases (within OASys) and ensure that the case manager has, where required, completed a full layer 3 OASys assessment rather than a layer 1 basic assessment with the quality team completing monthly reviews using the Case Management Quality Tool and team managers undertaking monthly case audits and the implementation of action/development plans where practice is not in line with assessment practice direction.</p> <p>Physical Infrastructure – DDC CRC will:</p> <p>Implement a review of South West region facilities, such as information and communications technology (ICT) and estates to ensure that they sufficiently support the delivery of high-quality services.</p>	<p>JIU</p> <p>KSS Estates</p>	<p>June 2019</p> <p>July 2019</p>
3.	Make sure line managers focus on delivering engagement of service users in assessment and planning, and the management of risk of harm	Agreed	<p>DDC CRC will implement a QA framework that facilitates line manager's ability to focus on delivering engagement of service users in assessment and planning, and the management of risk of harm. The Service Delivery Improvement Board met with the DDC CRC Senior Leaders Team in January 2019 and will continue to embed the agreed approach to service delivery.</p> <p>DDC CRC developed the Individualised action planning approach relaunch with the Middle Leadership Team in January 2019 and will undertake a review of case management middle manager/ Senior Probation Officers (SPO) spans of control to include total staff and underpinning caseload.</p> <p>A temporary support team for Dorset will be drafted in (drawn from a mix of sessional other Local Delivery Unit (LDU) staff) to include SPOs, Quality Development Officer Support to support the management oversight.</p> <p>Temporary support team to oversee the office shutdown days to review enforcement and risk and the delivery of the immediate risk management development events.</p> <p>DDC CRC will publish a Workload Prioritisation Direction and implement a team workshop event to ensure understanding of its use which will be</p>	<p>L&D Lead</p> <p>L&D Lead</p> <p>L&D Lead/JIU</p> <p>L&D Lead</p> <p>JIU Lead</p> <p>JIU Lead</p>	<p>May 2019</p> <p>Completed</p> <p>May 2019</p> <p>April 2019</p> <p>April 2019</p> <p>April 2019</p>



			<p>applied by LDU Heads where caseloads cannot be reduced in the short-term.</p> <p>DDC CRC will relaunch a revised supervision template for professional staff to ensure that quality of case management is a priority area. Compliance with the revised supervision template will be subject to an audit of supervision in July 2019.</p>	JIU Lead	July 2019
4.	Increase staff engagement in the development of an effective workforce, including developing a partnership with trades unions	Agreed	<p>DDC CRC will develop staff employee forum and feedback loops and ensure staff engagement groups are set up to engage with the move to the KSS CRC Operating Model.</p> <p>DDC CRC will engage Unions positively by initiating an away day with KSS and SW Division leaders to develop a new operating model.</p>	Interim CPO	May 2019
				Interim CPO	April 2019
5.	Implement a recruitment strategy to deliver a full staff complement	Agreed	<p>DDC CRC will create a recruitment work stream that also focuses on short term contingency arrangements where absence, vacancy and caseload levels are high, or functions (such as community payback or Interventions) are holding vacancies. Temporary support team for Dorset will be drafted in (drawn from a mix of sessional and other LDU staff) to include SPOs, Quality Development Officer Support.</p> <p>Extra admin support will be sourced to support CMs work proactively with the Red/Red-Amber cases and set up a robust administrative support system of BRAG (Blue, Red, Amber Green progress reviewing system) to ensure that the changing risks are managed by CMs.</p> <p>DDC CRC will undertake a full review of the Community Payback (CP) resource model against the CP contract requirements and implement a CP Recovery Plan.</p>	L&D Lead	April 2019
				L&D Lead	April 2019
				Head of CP	September 2019
6.	Urgently address the poor case management provided by staff in the Dorset and Devon offices	Agreed	<p>DDC CRC will implement a pan SW Division workload review to</p> <ul style="list-style-type: none"> • identify locations where additional case manager resource can be deployed most effectively, • implement a Cluster methodology of working (POs oversee the work of a couple of PSOs who hold a higher risk profile cases) and • implement a workload task prioritisation tool to ensure that public protection activities are prioritised. 	L&D Lead/ Continuous Improvement Lead	May 2019



			<p>The Justice Innovation Unit (JIU) has developed a workload prioritisation tool for managers to use where caseloads cannot be reduced in the short term.</p> <p>In the Dorset Office, current workloads will be reviewed and the resourcing of the Dorset team will be prioritised. PSO training on risk of harm and service user engagement will be prioritised. DDC CRC will increase management capacity in Dorset specifically to deliver more effective management oversight of case management. We will relaunch the revised supervision template for professional staff that ensures quality of case management is a priority area and DDC CRC will roll out Risk Management training to Dorset professional staff.</p> <p>In the Devon Office, DDC CRC will resolve Torquay Estates issues, review and implement contingencies in relation to the Torbay offices and ensure the estates and facilities are adequate to deliver quality case management that includes adequate Wi-Fi for all staff. A work stream will be developed to ensure that staff have access to suitable office space that provides sufficient capacity for service users to be seen in accordance with the minimum contact specification.</p>	<p>JIU</p> <p>JIU</p> <p>Devon and Cornwall LDU</p>	<p>Completed</p> <p>May 2019</p> <p>May 2019</p>
Recommendation for HM Prison and Probation Service					
7.	Take urgent steps to improve the delivery of services in Dorset, Devon and Cornwall and identify and address any issues that may also affect other CRCs in the Working Links group.	Agreed	<p>On 14 February 2019 Working Links entered Administration. Ownership of the three Working Links CRCs, including DDC, transferred to Kent, Surrey & Sussex CRC (Seetec).</p> <p>KSS CRC is working very closely with the Authority to implement an agreed Mobilisation Plan for the three CRCs. In addition to quickly stabilising the financial and performance position of DDC CRC and its supply chain, the new owners are focussed on driving-up the quality and impact of service delivery and are addressing HMIP recommendations to achieve this.</p>	<p>Deputy Director, Directorate of Community Interventions, HMPPS</p>	<p>May 2019</p> <p>May 2019</p>

