



HM Prison &
Probation Service

Action Plan Submitted: 26 September 2019

A Response to the HMI Probation Inspection: Bristol, Gloucestershire,
Somerset, Wiltshire Community Rehabilitation Company

Report Published: 26 September 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: BGSW CRC

1. Rec No	2. Recommendation	3. Agreed/ Partly Agreed/ Not Agreed	4. Response Action Taken/Planned	5. Responsible Owner (job title, their functional role or department)	6. Target Date
1	The Bristol, Gloucestershire, Somerset and Wiltshire CRC managed by Kent, Surrey and Sussex CRC should: ensure that all staff understand the importance of public protection work and are suitably trained in delivering it, and that there is an appropriate focus on managing risk of harm.	Agreed	<p>Bristol, Gloucestershire, Somerset and Wiltshire Community Rehabilitation Company (BGSW CRC) will:</p> <ol style="list-style-type: none"> 1. Roll out South West Training and Development 2019/20 Plan which will support all staff in improving public protection and managing risk through various training mediums and events. This includes staff from all departments (case management, Community Payback, Through the Gate (TTG) and Interventions to all grades, where applicable). 2. Roll out a 2 day training event across the South West in relation to risk management and public protection called Practice Skills in order to capture all staff current and new, which also covers domestic abuse and safeguarding. 3. Ensure online Safeguarding and Prevent training will be completed by all staff from all departments to improve practice in these specific areas 4. Appoint an additional 4.5 Domestic Abuse Specialist Advisers who will be Independent Domestic Violence Advocate trained and incorporate the partner link officer role attached to the Building Better Relationships programme to further support victims of domestic abuse. 5. Complete LQI (Local Quality Inspection) which is a whole system review of Case Management, Interventions and CP. HMIP standards are used to assess internal responses to all delivery by assessing a minimum of 20% of the whole caseload. The LQI will be undertaken in all Local Delivery Units (LDUs) in BGSW utilising Senior Probation Officers (SPO's), Quality Development Officers (QDOs) and Excellence and Effectiveness (E&E) staff to review 	<ol style="list-style-type: none"> 1. Assistant Chief Probation Officer Learning and Development 2. ACO L&D 3. ACO L&D 4. ACO Interventions 5. ACO Excellence and Effectiveness 	<p>July 2020</p> <p>April 2020</p> <p>April 2020</p> <p>April 2020</p> <p>February 2020</p>



			<p>practice in relation to risk, assessing good practice and areas for improvements and make recommendations to address areas of concern.</p> <ol style="list-style-type: none"> 6. Analyse LQI results to measure impact of training in relation to risk management and public protection to see if there is improvement in delivery and focus of staff across all departments in BGSW. The baseline for such will utilise all external and internal audits / reviews of practice undertaken in the year prior. 7. Provide any further training needed based on outcomes of the LQI and develop the South West Training 2020/21 Plan using results <p>BGSW CRC has sent out fortnightly Learning and Development (L&D) Bulletins to inform staff of all upcoming training events and SPOs and managers will support individual staff to improve individual practice relating to risk and public protection</p>	<p>6. ACO E&E</p> <p>7. ACO E&E</p> <p>ACO L&D</p>	<p>March 2020</p> <p>February 2020</p> <p>Completed</p>
2	The Bristol, Gloucestershire, Somerset and Wiltshire CRC managed by Kent, Surrey and Sussex CRC should establish a sufficient range of interventions and services to help reduce the risk of reoffending and harm.	Agreed	<p>BGSW CRC will:</p> <ol style="list-style-type: none"> 1. Create a specific offer for women and young service users, including care leavers. These interventions will be submitted to the Wales Effective Interventions Panel for approval where they are part of the Wales' suite or seek alternative accreditation 2. Commence delivery of Women and Young Service Users offer 3. Measure impact and outcomes of delivery of new interventions through service user feedback and support from the Kent, Surrey and Sussex (KSS) Research Team 4. Appoint an additional 4.5 FTE Domestic Abuse Specialist Advisers who will be Independent Domestic Violence Advocate trained and incorporate the partner link officer role attached to the Building Better Relationships programme to further support victims of domestic abuse. 5. Introduce the Resolve and Drink Impaired Drivers Programme across BGSW in all LDUs 	<p>1. ACO Interventions</p> <p>2. ACO Interventions</p> <p>3. ACO Interventions</p> <p>4. ACO Interventions</p> <p>5. ACO Interventions</p>	<p>April 2020</p> <p>June 2020</p> <p>October 2020</p> <p>February 2020</p> <p>February 2020</p>



			<ol style="list-style-type: none"> 6. Expand the Interventions team to 8.5 Treatment Managers and 36.5 Facilitators to support increased frequency and volume of group intervention delivery. Expected benefits will be a reduction in waiting lists, an increased capacity to address criminogenic need, reduce risk of harm and reoffending, and protection of the public 7. Recruit Peripatetic facilitators specifically to deliver RARs to NPS service users, on a one to one basis, subject to demand 8. Hold a Task and Finish group for Education, Training and Employment (ETE) and Volunteering and Mentoring services to develop a bespoke service for BGSW which will further support service users thus helping to reduce risk of harm and reoffending 9. Roll out ETE, Volunteer and Mentoring offer across BGSW in all LDUs where there is a need 	<ol style="list-style-type: none"> 6. ACO Interventions 7. Deputy Chief PO Transformation 8. ACO Interventions 9. ACO Interventions 	<p>February 2020</p> <p>February 2020</p> <p>January 2020</p> <p>April 2020</p>
3	The Bristol, Gloucestershire, Somerset and Wiltshire CRC managed by Kent, Surrey and Sussex CRC should provide sufficient and effective management oversight of all aspects of casework, with particular focus on managing risk.	Agreed	<p>BGSW CRC will:</p> <ol style="list-style-type: none"> 1. Establish a new Administration and Facilities function in order to remove facilities management from the responsibility of SPOs, thus enabling them to provide greater professional oversight to all aspects of risk management 2. Appoint an SPO with the specific remit to support implementation and delivery of HMIP Plan 3. All Serious Further Offences (SFO) and complaint reviews are completed by the Excellence and Effectiveness Team. This will increase SPO capacity in relation to operational management oversight by removing this element from their current portfolio 4. Appoint Quality Development Officers (QDOs) to support quality assurance and oversight and improve case management in relation to risk 5. Provide SPOs with a new Supervision Policy which supports SPO development by providing a framework in terms of their supervision practice which uses reflective practice with those under their line management. The outcome will be to promote management oversight in relation to risk within one to one sessions 	<ol style="list-style-type: none"> 1. ACO Admin and Facilities 2. Chief Officer 3. ACO E&E 4. ACO E&E 5. ACO E&E 	<p>February 2020</p> <p>September 2019</p> <p>Completed</p> <p>October 2019</p> <p>October 2019</p>



			<p>6. Roll out Management Oversight guidance to all SPO's which details what activity SPOs should undertake when discussing cases during supervision, outside of supervision, endorsing work (OASys - an offender risk management tool / Breach) and case allocation.</p>	6. E&E	March 2020
4	<p>The Bristol, Gloucestershire, Somerset and Wiltshire CRC managed by Kent, Surrey and Sussex CRC should ensure that sufficient and appropriately trained staff are in post to deliver effective case management to all service users.</p>	Agreed	<p>BGSW CRC will:</p> <ol style="list-style-type: none"> 1. Recruit to the full staffing complement for BGSW which includes an additional 11.5 POs and 26.5 PSOs so that caseloads will become more manageable 2. Roll out the KSS CRC South West Learning and Development Plan which outlines the training strategy for all staff from all departments (case management, CP, TTG and Interventions and all grades where applicable) to ensure all staff are sufficiently trained to perform their roles, including the delivery of effective case management, within the delivery of the sentence. The LQI will be used to demonstrate this improvement 3. Create a Vocational Qualification Centre across BGSW to allow PSO staff to undertake Level 3 apprenticeship or VQ3 Probation Practice. This is an accredited centre by City and Guilds, Skills for Justice and Institute for Leadership and Management to deliver a range of qualifications to permanent staff members in-house and sites across BGSW have already been approved with assessors currently being sourced throughout the region 4. Create and expand the E&E team across BGSW to inform ongoing learning and development planning from collation of evidence from all audit, investigations, SFOs and complaint activities 	<ol style="list-style-type: none"> 1. ACO BGSW 2. ACO L&D 3. ACO L&D 4. ACO E&E 	<p>February 2020</p> <p>April 2020</p> <p>January 2020</p> <p>March 2020</p>



Recommendations	
Agreed	4
Partly Agreed	0
Not Agreed	0
Total	4

