



HM Prison &
Probation Service

Action Plan Submitted: 7th December 2020

A Response to: A Thematic Review of Probation Recall Culture and Practice

Report Published: 10th November 2020

Action Plan Update Submitted: 7th December 2021

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: A Thematic Review of Probation Recall Culture and Practice

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
	HM Prison and Probation Service should:				
1	Introduce a revised process for issuing licence warnings that includes guidance on thresholds, practice advice, and the recording of management decisions	Agreed	<p>The Quality and Effective Practice Team (Q&E) in the Effective Practice and Service Improvement Group (EPSIG) will develop guidance for a revised process for issuing licence warnings. This will include the requirement to review risk management activity accompanying alternatives to recall. It will align with the Touch Points model; the new National Probation Service (NPS) model for management oversight and will utilise mechanisms developed for the recording of management oversight and decision making.</p> <p>The Touch Points Model for management oversight will be amended to incorporate the expectations within this revised guidance.</p>	Deputy Director, Effective Practice and Service Improvement Group	April 2021
			<p>Update December 2021</p> <p>The Q&E team in EPSIG have developed new guidance for recording recall decisions and issuing letters which is currently being implemented across all regions. The new process is heavily aligned to the Touch Points Model (TPM) and the TPM guidance has been reviewed to incorporate this.</p>	Deputy Director, Effective Practice and Service Improvement Group	Completed
2	Review the use, accessibility and effectiveness of alternatives to recall. This should include the role of approved premises	Agreed	<p>The revised process for licence warnings developed in response to recommendation 1 will incorporate an expectation of review of the alternative to recall decisions made as part of the warning process. This will utilise the recording mechanism designed as part of the Touch Points Model for monitoring purposes.</p> <p>A review of the Approved Premises (AP) priority referral allocations process will ensure that risk escalation licence cases, where the Head of Service view</p>	<p>Deputy Director, Effective Practice and Service Improvement Group</p> <p>Deputy Director, Residential and</p>	<p>April 2021</p> <p>Completed</p>

			is that AP residence is a key action to manage risk and prevent recall, will be included in Priority One. This will give them the highest priority when allocating a bed space.	Accommodation Support Services	
			Update December 2021 The revised process for recording recall decisions and issuing letters is complete and incorporates alternatives to recall and management oversight activity for monitoring purposes. A review of the Approved Premises (AP) priority referral allocations process was completed which ensures that risk escalation licence cases are included in Priority One giving them the highest priority when allocating a bed space.	Deputy Director, Effective Practice and Service Improvement Group Deputy Director, Residential and Accommodation Support Services	Completed Completed
3	Analyse information on recalls to identify any significant variations in practice both between and within organisations. This should include the recall rates for women and black, Asian and minority ethnic service users	Agreed	The Public Protection Group (PPG) will issue quarterly Management Information System (MIS) recall data including high level trend analysis. Probation Regions will review information to identify local variations in practice and analyse data concerning the recall of offenders by gender and ethnicity. Once the Effective Probation Framework 3 (EPF3) has been designed and implemented, information and MIS reports will be available on recall rates for all service users by individual Offender Manager, Local Delivery Unit and Probation Region.	Deputy Director, Public Protection Group Probation Deputy Director, Courts	March 2021 November 2021
			Update December 2021 The Public Protection Group (PPG) routinely issue quarterly Management Information System (MIS) recall data including high level trend analysis. Probation Regions review information to identify local variations in practice and analyse data concerning the recall of offenders by gender and ethnicity. A prototype has been developed as a digital aid (EPF3) to recall decision making and has been user tested. The viability of an alternative in-house digital solution is also being explored. A decision on the final option to be progressed will be made by January 2022.	Deputy Director, Public Protection Group Senior Responsible Officer for the Probation Reform Programme	Completed January 2022

4	Ensure that bias and unconscious bias in recall decisions are reviewed as part of the recall quality assurance process	Agreed	In addition to the data analysis provided by PPG in recommendation 3, and as part of the response to recommendation 6 in the Independent Review of the Case of Joseph McCann, the Action Plan indicates the Alternatives to Recall Quality Development Tool is under review. The Q&E team in EPSIG will work with the Diversity and Inclusion team to incorporate consideration of conscious and unconscious bias within the process of recall decision making and the quality assurance process as part of this review.	Deputy Director, Effective Practice and Service Improvement Group	March 2021
			As part of EPF3 design it will address issues of unconscious bias in the recall decision making process.	Probation Deputy Director, Courts	November 2021
			Update December 2021 A Management Oversight Quality Development Tool (QDT) has been developed and released. It includes consideration of conscious and unconscious bias in decision making decisions. The digital aid (EPF3) to recall decision making prototype reduces potential for conscious and unconscious bias. It also provides an audit trail of all information used to inform the decision, enabling quality assurance. However, the viability of an alternative in-house digital solution is also being explored. A decision on the final option to be progressed will be made by the end of January 2022.	Deputy Director, Effective Practice and Service Improvement Group	Completed
				Senior Responsible Officer for the Probation Reform Programme	January 2022
5	Review the responsibilities and the actions of the Part B risk assessment process, including the 10-day timescale, to ensure the submitted risk management report is based on all relevant information	Agreed	The PPG and the Parole Board are exploring the introduction of a pilot project in January 2021, to test how the timescale for production of Part B reports can be extended, while maintaining compliance with legislation, Parole Board Rules, and procedural justice requirements. As part of the design work on and evaluation of the pilot, we will consider whether change is needed to the existing roles and responsibilities.	Deputy Director, Public Protection Group	July 2021
			Update December 2021 The PPG and the Parole Board are running a pilot project which has been extended into 2022 due to encouraging initial results. It involves extending the timescale for production of Part B reports from 10 to 15 days, while	Deputy Director, Public Protection Group	March 2022

			maintaining compliance with legislation, Parole Board Rules, and procedural justice requirements. The hope is that additional time, linked to the roll-out of OMiC, will improve the quality of the reports		
6	Review the operation of executive release to ensure it operates consistently across all organisations	Agreed	<p>PPG will work with the EPSIG, to review the operation of the Executive Release process, and issue revised policy instruction and guidance.</p> <p>PPG will analyse MIS data to identify if extended timeframes for completing initial risk management plans, outlined in recommendation 5, and updated guidance, improves the ratio of releases to reviews.</p>	Deputy Director, Public Protection Group	March 2021
			<p>Update December 2021</p> <p>PPG has issued fresh guidance and a new process map which has been published on EQUIP.</p> <p>PPG will continue to work with EPSIG to develop further communications for Probation front line staff as required.</p>	Deputy Director, Public Protection Group	Completed
7	Ensure there is the necessary time to fully assess the suitability of potential release addresses when implementing home detention curfew arrangements to	Agreed	<p>The Home Detention Curfew (HDC) Policy Framework states that the probation provider must ensure that Address Checks forms are completed fully and accurately within 10 working days of receipt, and that all HDC actions are properly recorded. However, it also states that, as part of this process, probation must confirm whether there are any risk management planning actions that must take place prior to release to that address/area and why release cannot take place in their absence. It instructs that probation flag whether further information is needed in order to assess final suitability. Therefore, the guidance to practitioners is that any information essential to risk management planning must be in place before a decision can be reached.</p> <p>HMPPS agree it is necessary to ensure sufficient time is given to consider management of risk at the proposed address and work with practitioners to ensure the guidance is fully understood, commencing any additional training required early 2021.</p>	Deputy Director Prisons, Director General Prisons	June 2021

			Update December 2021 Since the original recommendation, the Department has begun a review of the HDC Policy Framework, with the aim of issuing a revised framework in early 2022. This review has necessitated a delay to the development of training, which will be designed to address all updates to the policy and will be rolled out to coincide with implementation of the revised Framework.	Deputy Director Prisons, Director General Prisons	March 2022
	Her Majesty's Prison and Probation Service, together with the Community Rehabilitation Companies, should:				
8	Ensure there is a shared understanding of the recall framework including thresholds and criteria, within the new English regional probation divisions, when the CRC contracts end. This should include training in line with the events undertaken by HMPPS Wales following re-unification in December 2019.	Agreed	HMPPS is developing learning pathways, for transitioning staff on risk, safeguarding, recall and sentence management. It will be based upon the programme that was undertaken in Wales prior to unification in December 2019 and will be informed by established learning and development tools for effective recall. A plan for sequencing the required learning for staff to support unification is also being developed.	Senior Responsible Officer, Probation Reform Programme. Executive Director, Probation Workforce and Recovery Programme	June 2021
			Update December 2021 The national transition L&D plan was agreed and finalised in March 2021 and outlined the learning provided to support staff pre and post transition to the unified Probation Service. The plan included learning pathways for all sentence management staff, which detailed the learning to be completed. This included the following: <ul style="list-style-type: none"> • Safeguarding • Recall • Risk Assessment • Arms informed OASys • MAPPA (to be rolled out November 2021) 	Senior Responsible Officer, Probation Reform Programme. Executive Director, Probation Workforce and Recovery Programme	Completed

			All regions have developed implementation plans which identify key milestones for completion of learning, including recall. Regions are working towards end of March 2022 for completion of all learning.		
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