

Policy Name: Enhanced Behaviour Monitoring (EBM) Policy Framework

Reference: N/A

Issue Date: 16 May 2019

Implementation Date: 16 May 2019

Replaces the following documents which are hereby cancelled:

PSI 24/2015/ PI 16/2015 Enhanced Behaviour Monitoring (EBM)

Introduces amendments to the following documents e.g. PSIs, PSOs, Custodial Service Specs): None

Action required by:

<input type="checkbox"/>	HMPPS HQ	<input checked="" type="checkbox"/>	Governors
<input checked="" type="checkbox"/>	Public Sector Prisons	<input type="checkbox"/>	Heads of Group
<input checked="" type="checkbox"/>	Contracted Prisons	<input type="checkbox"/>	Contract Managers in Probation Trusts
<input checked="" type="checkbox"/>	National Probation Service	<input type="checkbox"/>	Community Rehabilitation Companies (CRCs)
<input type="checkbox"/>	HMPPS Rehabilitation Contract Services Team	<input type="checkbox"/>	HMPPS-run Immigration Removal Centres (IRCs)
<input type="checkbox"/>	Other providers of Probation and Community Services		

Mandatory Actions: All groups referenced above must adhere to the Requirements section of this Policy Framework, which contains all mandatory actions.

For Information:

Subject to complying with the requirements of this Policy Framework, Governors¹ can prioritise and choose when and if to develop a local policy. Should Governors choose to retain the basis of their existing scheme some immediate changes are required by the implementation date to meet new or amended requirements introduced in this Policy Framework. These are:

- Replacing the EBM paperwork that was published with PSI 24/2015 with the paperwork associated with this new Policy Framework, and;
- Reviewing any local EBM policy to ensure it aligns with the new Policy Framework, including incorporating any content that currently points to the existing PSIs to ensure all necessary information is included.

¹ In this document the term Governor also applies to Directors of Contracted Prisons

Governors must also ensure that any new local policies that they develop as a result of this Policy Framework are compliant with relevant legislation, including the Public Sector Equality Duty (Equality Act 2010).

Resource impact:

Governors will be required to make some small immediate changes to meet new or amended requirements and will need to consider locally the impact that any new local policy which they develop will have on their resources.

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1. Purpose

- 1.1 Enhanced Behaviour Monitoring (EBM) provides a mechanism for giving assurance that ongoing risks (e.g. of harm; re-offending, or abscond) are being appropriately identified and managed within open prisons and with relevant residents of women's prisons, and subsequently as individuals are permitted to spend unescorted periods of time away from the prison in the community whilst Released on Temporary Licence (ROTL).
- 1.2 The EBM process is for use in open prisons and with residents of women's prisons who are categorised as suitable for open conditions. It involves enhanced monitoring of those Restricted ROTL cases identified via the EBM case file review process as exhibiting current behaviours which could be indicative of elevated risk (e.g. of harm; re-offending, or abscond), and who require increased risk management activity.
- 1.3 EBM also operates within Progression Regimes located in the closed male estate.

2. Outcomes

- All men in open prisons and women assessed as suitable for open conditions who are subject to Restricted ROTL will have an EBM case file review completed by a psychologist.
- The swift identification of ongoing risk-related behaviours contributes to more effective risk management of them.
- Decisions as to whether individuals would benefit from EBM are made on the basis of the presence or absence of risk-related behaviours, as well as focusing on broader compliance behaviours, and the extent to which EBM would be helpful in the risk management of the case.
- All staff having contact with residents who are being actively EBM managed must support the monitoring process by providing evidence of their interactions with the individuals.
- All relevant staff are appropriately trained to ensure they understand and effectively contribute to the EBM process.
- The EBM process is collaborative and supportive, including a clear feedback loop to participants, to help them understand and (where possible) manage their own risks more effectively.
- Decisions are recorded and individuals have the process properly explained to them, and are encouraged to participate fully with it.
- The risk-related behaviours of those who choose not to participate with EBM are monitored, irrespective of their engagement with the process.

3. Requirements

- 3.1 [Annex A](#) shows the mandatory EBM process timeline, which begins from the time of arrival at an open prison (or the time at which a resident is categorised as suitable for open conditions within the women's prison estate), and continues until the final stages of the EBM process have been concluded (normally 30 weeks later).
- 3.2 Each prison must have a system for identifying eligible EBM cases and ensuring that the psychology case file reviews are completed, and that defensible decisions are made about

whether or not to monitor and manage each person via EBM. The decisions and the case file reviews must be disclosed to the relevant individual.

- 3.3 Each person being monitored and managed via EBM must be made aware of their behavioural targets, and monthly meetings must take place between at least the prison offender manager and the participant (when they choose to engage) to review the behavioural evidence of progress against each target.
- 3.4 Information from the EBM monitoring process must be fed into existing risk management processes (e.g. ROTL Board, OASys reviews, Multi-Agency Public Protection Arrangements [MAPPA]).
- 3.5 Once the period of EBM has concluded, the individual's ongoing risk management remains the responsibility of the prison offender manager in charge of the case. They must return to being monitored and managed under normal prison management systems.
- 3.6 Detailed guidance as to the responsibilities of different staff involved in the EBM process is published separately, and should be referred to alongside this Policy Framework.
- 3.7 Residents already being monitored via EBM at the date of implementation of this Policy Framework will continue to be monitored for the planned six month period of their EBM, even if they would no longer be Restricted ROTL cases under the new criteria set out in the ROTL Policy Framework.

4. Constraints

- 4.1 Governors must not sanction the use of EBM with Standard ROTL cases (unless there are exceptional reasons for doing so).
- 4.2 Governors must not permit EBM to be used with any male residents in closed prisons (except Progression Regimes), or residents of women's prisons who have not been categorised as suitable for open conditions, even if those individuals would be Restricted ROTL cases.
- 4.3 The EBM case file review is not a risk assessment. It is a means of collating all known risk related information about an individual. Governors and other staff must not use the case file review to evaluate whether or not progress to open conditions was justified or appropriate.
- 4.4 Whilst the EBM case file review can be used by Governors as part of the ROTL decision making process, it must not be used as a substitute for the ROTL risk assessment processes and paperwork being followed and completed fully.

EBM PROCESS TIMELINE

Stage	By the end of:	Process	Person responsible
1	Week 1	Individual receives information about EBM during the prison induction. Referral made to regional psychology team by the case administrator for any cases meeting the EBM screening criteria.	Induction Staff Case Administrator
2	Week 2	Regional psychology team allocate the case file review to a named psychologist to complete.	Psychology
	Week 4	EBM case file review completed by allocated psychologist and signed off by an appropriately qualified prison manager.	Psychology Prison manager
	Week 5	Psychologist meets with individual to explain process and seek consent if placed on EBM. Otherwise, the individual is informed they are unsuitable for EBM. Psychologist forwards completed case file review to prison offender manager and case administrator. Case administrator records outcome of EBM case file review on PNOMIS. The EBM alert flag is activated if necessary to signify that the individual is being managed via EBM. If being managed via EBM, the case administrator also cascades the case file review document to all relevant parties (to include security, MAPPA, other specialist services if applicable [e.g. where the individual is managed through the Offender Personality Disorder Pathway, the relevant clinical psychologist]). The prison offender manager sends a copy of the completed EBM case file review to the community offender manager (if relevant) if the prisoner is found suitable for EBM.	Psychology Psychology Case Administrator Prison offender manager

		The prison offender manager begins to undertake a review of the OASys in cases found suitable for EBM. This review should be completed by the end of EBM week 12. If the individual is found unsuitable for EBM, the EBM case file review report can be used to assist the OASys review and any subsequent ROTL decision making processes.	
3	Week 6	Case administrator arranges date for initial EBM meeting (for weeks 7 or 8) ensuring that the necessary staff can attend (see Guidance Annex F for list of staff), including the resident.	Case Administrator
	Week 7 – 8	Initial EBM meeting (EBM Meeting 1) takes place in either week 7 or 8 where the individual's 6 main behavioural indicators and targets are discussed/agreed (see Annex F for initial meeting agenda)	Chaired by prison offender manager and minutes taken by Case Administrator
		Following initial meeting, EBM-1 is completed by custody probation officer and forwarded to case administrator.	Prison offender manager
		EBM-1 disseminated by case administrator to all key individuals involved in the care and management of the individual by the end of week 8.	Case Administrator
		Following initial meeting, sections 1 & 2 of EBM-3 completed by case administrator.	Case Administrator
		Case administrator to publish a summary of the meeting (i.e. relevant risk management information) on the person's PNOMIS case notes.	Case Administrator
	Week 11	EBM-2 and 2P behavioural indicators and targets are recorded by case administrator, and sent out to staff/resident to complete and return to case administrator.	Case Administrator
		Case administrator to provide contributions to prison offender manager to read before next meeting.	

	Week 12	EBM Meeting 2 (review written contributions and review/discuss EBM-3 Section 3; see Annex F for monthly meetings agenda) Following meeting, prison offender manager to document the contents of such on PNOMIS and update Section 3 of EBM-3 document, and to provide a copy of EBM-3 to case administrator. Case administrator to provide a copy of EBM-3 to resident.	Prison offender manager Prison offender manager Case Administrator
	Week 15	EBM-2 and 2P behavioural indicators and targets are recorded by case administrator, and sent out to staff/resident to complete and return to case administrator. Case administrator to provide contributions to prison offender manager to read before next meeting.	Case Administrator
	Week 16	EBM Meeting 3 (review written contributions and review/discuss EBM-3 Section 3) Following meeting, prison offender manager to document the contents of such on PNOMIS and update Section 3 of EBM-3 document, and to provide a copy of EBM-3 to case administrator. Case administrator to provide a copy of EBM-3 to resident.	Prison offender manager Case Administrator
	Week 19	EBM-2 and 2P behavioural indicators and targets are recorded by case administrator, and sent out to staff/resident to complete and return to case administrator. Case administrator to provide contributions to prison offender manager to read before next meeting.	Case Administrator
	Week 20	EBM Meeting 4 (review written contributions and review/discuss EBM-3 Section 3)	Prison offender manager

		<p>Following the meeting, prison offender manager to document the contents of such on PNOMIS and update Section 3 of EBM-3 document, and to provide a copy of EBM-3 to case administrator.</p> <p>Case administrator to provide a copy of EBM-3 to resident.</p>	Case Administrator
	Week 23	<p>EBM-2 and 2P behavioural indicators and targets are recorded by case administrator, and sent out to staff/resident to complete and return to case administrator.</p> <p>Case administrator to provide contributions to prison offender manager to read before next meeting.</p>	Case Administrator
	Week 24	<p>EBM Meeting 5 (review written contributions and review/discuss EBM-3 Section 3)</p> <p>Following meeting, prison offender manager to document the contents of such on PNOMIS and update Section 3 of EBM-3 document, and to provide a copy of EBM-3 to case administrator.</p> <p>Case administrator to provide a copy of EBM-3 to resident.</p>	<p>Prison offender manager</p> <p>Case Administrator</p>
	Week 27	<p>EBM-2 and 2P behavioural indicators and targets are recorded by case administrator, and sent out to staff/resident to complete and return to case administrator.</p> <p>Case administrator to provide contributions to prison offender manager to read before next meeting.</p>	Case Administrator
	Week 28	<p>Final EBM Meeting (see Annex F of Guidance for Staff for final meeting agenda)</p>	<p>Chaired by prison offender manager and minutes taken by Case Administrator</p>

		EBM-3 targets reviewed	All key staff to attend including Psychology
		Content agreed and recorded for sections 4 and 5 of EBM-3.	Prison offender manager
		Information from final meeting recorded on PNOMIS.	Case Administrator
	Week 30	EBM-3 finalised by prison offender manager and forwarded to case administrator and community offender manager (if relevant).	Prison offender manager
		EBM-3 distributed to relevant parties (including the resident) by case administrator.	Case Administrator

Where the decision is taken to extend the timeframe for EBM (see section 22 of Guidance for Staff), the stage 1 timescales should remain the same, and the extended monitoring should follow the timeframe principles specified above, with the addition of extra monthly review meetings (up to a maximum of six months of additional monitoring).