



HM Prison &
Probation Service

Action Plan Submitted: 14th July 2020

A Response to the HMI Probation Inspection: Hampshire and Isle of Wight
(HIOW) Community Rehabilitation Company (CRC)

Report Published: 16th July 2020

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 and GOV.UK 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.

ACTION PLAN: Hampshire and Isle of Wight (HIOW) 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
	Hampshire & Isle of Wight (HIOW) CRC should:				
1.	Ensure the availability of sufficiently trained and skilled staff when planning and implementing organisational change.	Agreed	<p>The Transition to the National Probation Service (NPS) has already started and will be governed through planning and monitoring by the Senior Management Team. The following actions will support this change:</p> <ul style="list-style-type: none"> • Senior leadership representation and responsibilities in the Regional Transition Board and sub groups agreed and communicated with Transition Board. • Process agreed to facilitate the identification, monitoring and escalation of strategic risks via Regional Transition Board • Establish a Bronze structure with local NPS to provide local collaboration and governance for recovery and transition. <p>To address the current issues related to sufficiently trained staff, we will take the following actions:</p> <ul style="list-style-type: none"> • Conduct a RAG assessment of Senior Case Manager (SCM) / Case Manager (CM) skills to establish levels of development need, enabling a targeted and informed approach. 	<p>Director or Operations</p> <p>Director or Operations</p> <p>Director of Operations</p> <p>Interchange Managers</p>	<p>August 2020</p> <p>August 2020</p> <p>August 2020</p> <p>August 2020</p>

Actions against targets are likely to be due to COVID 19 disruptions to service delivery

			<ul style="list-style-type: none"> Review current training plan against the recommendations of Domain 2 HMI Probation feedback to ensure it meets all learning requirements. Review the organisations capacity to move to SCM mentors following initial COVID-19 recovery. 	<p>Community Director (CD) with responsibility for Learning and Development (L and D)</p> <p>CD with responsibility for L and D</p>	<p>September 2020</p> <p>October 2020</p>
2.	Review the allocation criteria for the banding and allocation tool, so that it takes account of case managers' experience and skills before allocating cases with a history of domestic abuse.	Agreed	<ul style="list-style-type: none"> Central Interserve team to review the banding and case allocation process to take into account CM's experience and skills. Develop a competency framework to support the assessment of new CM's capability to work with Domestic Abuse Cases. Complete the competency framework for all CM's to assess their ability to work with cases with a history of Domestic Abuse to guide allocations and future training needs. 	<p>Central Interserve Justice Team</p> <p>CD with responsibility for Performance and Quality (P and Q).</p> <p>Interchange Managers</p>	<p>August 2020</p> <p>September 2020</p> <p>October 2020</p>
3.	Improve arrangements for timely and relevant domestic abuse information to be provided from Hampshire police to the CRC to support	Agreed	<p>HLOW CRC will build on progress that has already been made with Hampshire Police to improve the timely feedback of domestic abuse information.</p> <ul style="list-style-type: none"> Seek to extend the current information sharing agreement in place with Hampshire Police relating to established resettlement safeguarding checks. Monthly checks with Interchange Managers that effective information sharing processes are being maintained in 	<p>Director of Operations</p> <p>CD with responsibility for P and Q.</p>	<p>August 2020</p> <p>July 2020</p>

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	the management of risk of harm.		<p>each Hub to facilitate domestic abuse information exchange.</p> <ul style="list-style-type: none"> • Develop a Management Information Report to monitor safeguarding checks against registration flags. • Monitoring of the management information report in Continuous Improvement Meetings (CIM's) on a monthly basis to ensure 100% compliance. 	<p>CD with responsibility for P and Q</p> <p>CD with responsibility for P and Q</p>	<p>July 2020</p> <p>August 2020</p>
4.	Improve management oversight so that information on risk of harm is properly analysed, verified and acted upon to keep other people safe.	Agreed	<p>To improve Management oversight activity HLOW CRC will complete the following:</p> <ul style="list-style-type: none"> • Review our approach to Management Oversight, considering current practice, expectations and quality assurance processes. Review current arrangements as part of Exceptional Delivery Model (EDM) to assess whether these add value in business as usual. • Quality assurance of management oversight via bi-annual Interchange Manager (IM) peer learning events. • Develop revised management oversight expectations, linking to quality assurance processes. • Review the role of supervision with IM's to develop a refreshed supervision agenda and expectations ensuring there is adequate focus on public protection. • Establish guidance for staff setting out expectations of when cases should be escalated for management oversight. 	<p>CD with responsibility for P and Q and L and D.</p> <p>Interchange Managers</p> <p>Interchange Managers</p> <p>Interchange Managers</p> <p>Interchange Managers</p>	<p>August 2020</p> <p>September 2020</p> <p>August 2020</p> <p>September 2020</p> <p>September 2020</p>

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			<ul style="list-style-type: none"> • Access training for managers that focuses on safeguarding and supervision through Hampshire Safeguarding Board. • Central team review of the current Interchange Quality Assurance Tool (IQAM) Quality Assurance tool is planned to ensure it is appropriately focussed on the quality of risk assessments, risk management plans and the implementation of plans to keep people safe. 	<p>CD with responsibility for L and D</p> <p>Central Interserve Justice Team</p>	<p>October 2000</p> <p>September 2020</p>
5.	Improve the capacity and capability of the interventions team to meet the demand for interventions.	Agreed	<p>To improve the capacity and capability of the interventions team HLOW have recruited a further 6 CM's. They are currently being inducted into the role. This will support the team to meet the demand of interventions and the following steps will further support this:</p> <ul style="list-style-type: none"> • Review the capacity of the team and schedules to maximise delivery, considering the learning and development of new CM's. The recovery plans in relation to the EDM will directly impact this. • New CM's to be trained with an initial focus on delivery of Rehabilitation Activity Requirements (RAR) interventions to build capacity, with future plans to train in accredited programmes when available. • Review RAR schedule to ensure it aligns with HLOW Service User (SU) needs analysis. • Review and relaunch interventions referral process with case management teams. • Establish monthly meetings between interventions and case management teams to improve referrals, communication and oversight of SU's. 	<p>CD with responsibility for interventions.</p> <p>Interventions Managers</p> <p>Interventions Managers</p> <p>Interventions Managers and PIU.</p> <p>Interventions Managers</p> <p>Interventions Managers</p>	<p>September 2020</p> <p>August 2020</p> <p>October 2020</p> <p>August 2020</p> <p>August 2020</p> <p>September 2020</p>

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6.	Improve access to education, training and employment for relevant service users completing unpaid work requirements.	Agreed	<p>To improve access to Employment, Training and Education (ETE) for relevant SU's, HIOW will undertake the following work:</p> <ul style="list-style-type: none"> • Continue to develop the partnership between HIOW CRC and Romsey College to expand the opportunities for SU's to develop employability skills, vocational qualifications and life skills. • Develop an incremental plan to increase provision of ETE hours for SU's subject to Community Payback (CP) through exploring opportunities to work with providers across Hampshire, including Information, Advice and Guidance and Romsey College. • Relaunch Pathways to Employment RAR, providing a clear referral route for SU's subject to CP. • Review the current CP induction to include a greater emphasis on opportunities to access ETE provisions as part of CP hours. • Complete Briefings to CM's within HIOW and Professional Support Centre (PSC) regarding the referral process for establishing ETE as part of an Unpaid Work Requirement. 	<p>CD with responsibility for Community Payback (CP)</p> <p>CP Manager</p> <p>CP Manager / Interventions Manager</p> <p>CP Manager</p> <p>CP Manager</p>	<p>December 2020</p> <p>October 2020</p> <p>September 2020</p> <p>September 2020</p> <p>September 2020</p>
7.	Develop a clearer focus on public protection in the implementation and review of the	Agreed	HIOW CRC will continue to develop a clearer focus on public protection. This will be taken forward through a range of activities including formal training, reflective practice and quality assurance delivered to all SCM / CM's, on a one to one or group basis as needed. This will be completed	CD with responsibility for P and Q and CD's with responsibility for hub operations	

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	<p>sentence in all cases. (This recommendation has been repeated from the previous inspection).</p>		<p>through a strategic and targeted approach informed by conducting a RAG assessment of SCM / CM skills.</p> <ul style="list-style-type: none"> • Deliver a refreshed Public Protection workshop that encompasses learning from HMI Probation and consolidates Risk of Serious Harm (ROSH) training delivered in Autumn 2019. • Develop bi-annual peer learning events to support consolidation of learning and the development of professional curiosity. With an expectation that staff will attend one event every 6 months. <p>Assessment:</p> <ul style="list-style-type: none"> • Review and relaunch an assessment checklist to support SCM / CMs in ensuring they have collated sufficient information to support their assessments and reviews, informed by ROSH guidance 2020. • Training to introduce the 4 pillars approach to risk management as part of changes to OASys to be delivered to all SCM / CM's to support the development of ROSH assessment and Risk Management Plans (RMP) skills. <p>Planning:</p> <ul style="list-style-type: none"> • The CRC is returning to using the OASys Sentence Plan as the planning tool. Sentence Planning training will be designed and delivered to support SCM/CM's integrate risk priorities and risk management plans into objectives. • Sentence plan guidance will be produced to support the training. 	<p>CD with responsibility for L and D</p> <p>CD responsibility for L and D</p> <p>Interchange Managers</p> <p>CD with responsibility for L and D</p> <p>Interchange Managers</p> <p>Interchange Managers</p>	<p>October 2020</p> <p>October 2020</p> <p>August 2020</p> <p>August 2020</p> <p>September 2020</p> <p>September 2020</p>
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			<p>Implementation and Delivery:</p> <ul style="list-style-type: none"> • Reflective supervision to be provided bi-monthly to SCM / CM's focussing on domestic abuse and professional curiosity on a bi-monthly basis. • Relaunch to case management team's details of all interventions available to support sentence plan delivery. • Provide monthly referral and attendance information to teams regarding commissioned services to increase visibility and awareness of services. • Review home visiting practices established as part of EDM to develop refreshed guidance to support practice in managing risk to others. • Establish monthly meetings between interventions and case management teams to improve referrals, communication and oversight of SU's. • Develop and deliver a workshop to case managers to improve the management and monitoring of the SU's progress through interventions. <p>Review:</p> <ul style="list-style-type: none"> • Introduce a review checklist to prompt actions to keep people safe. • Formal Sentence Plan Reviews to be tracked through Case Coordinator prompts and review meetings with SCM / CM's with oversight on completions by Interchange Managers. 	<p>Treatment Managers</p> <p>Interchange Managers</p> <p>CD with responsibility for P and Q</p> <p>P and Q Board</p> <p>Interchange Managers</p> <p>Interchange Managers</p> <p>Interchange Managers</p> <p>Interchange Managers</p> <p>Interchange Managers</p>	<p>August 2020</p> <p>August 2020</p> <p>August 2020</p> <p>September 2020</p> <p>September 2020</p> <p>September 2020</p> <p>September 2020</p> <p>September 2020</p> <p>August 2020</p>
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Recommendations	
Agreed	7
Partly Agreed	0
Not Agreed	0
Total	7



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