



Action Plan Submitted: 11th October 2018

A Response to the HMI Probation Inspection: Merseyside Community
Rehabilitation Company

Report Published: 26th September 2018

INTRODUCTION

HM Inspectorate of Prisons (HMIP) and HM Inspectorate of Probation for England and Wales are independent inspectorates which provide scrutiny of the conditions for, and treatment of prisoners and offenders. They report their findings for prisons, Young Offender Institutions and effectiveness of the work of probation, Community Rehabilitation Companies (CRCs) and youth offending services across England and Wales to Ministry of Justice (MOJ) and Her Majesty's Prison and Probation Service (HMPPS). 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 plans 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 sent to HMIP and published on the HMPPS web based Prison Finder. Progress against the implementation and delivery of the action plans will also be monitored and reported on.

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: Merseyside 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
1	<p>Merseyside CRC should:</p> <p>Improve the quality and impact of work to manage risk of harm so as to keep actual and potential victims safe.</p>	Agreed	<p>Interserve Community Rehabilitation Companies (CRCs) have a Central Practice Team who support local CRCs, including Merseyside CRC, with the development of policy and practice guidance. Merseyside CRC works to the developed Risk Guidance, is rolling out the supporting training material, and is embedding Enhanced Management Oversight (EMO). EMO is a formalised tool for reviewing cases where risk of harm is identified - specific focus includes domestic abuse and safeguarding cases. This process is conducted by Interchange Managers (Operational Middle Managers) and they provide feedback to operational staff, including Senior Case Managers (Probation Officers) and Case Managers (Probation Service Officer).</p> <p>Merseyside CRC, and Cheshire & Greater Manchester (CGM) CRC, have one Chief Executive Officer and Senior Management Team. To provide governance to priority areas of practice, the CRCs have established Practice Development Groups (PDGs). PDGs are led by a Community Director (Senior Manager) and the membership includes Interchange Managers from across the two CRCs.</p> <p>Actions:</p> <ul style="list-style-type: none"> • Merseyside CRC will embed the EMO process, which is planned and monitored with administrative support. • Merseyside CRC will deliver Risk of Harm training to Case Managers, as per the Training Schedule detailed under recommendation 2. • Completion of the relevant PDGs: <ul style="list-style-type: none"> - Risk and Safeguarding PDG - Domestic Abuse PDG 	<p>Community Directors</p> <p>Community Director CGM/ Risk & Safeguarding PDG Members</p>	<p>December 2018</p> <p>February 2019</p> <p>October 2018 October 2018</p>



		<ul style="list-style-type: none"> • From the PDGs there will be a robust governance framework: <ul style="list-style-type: none"> - Identification/dissemination of Quality Assurance learning. - Senior Leads/Operational Leads updated by Strategic Lead to ensure consistent messages, directions and learning. - SFO quarterly learning. - Enhanced Management Oversight Audit to assess the use, quality and effectiveness in Merseyside and Cheshire & Greater Manchester CRCs. • The PDGs will task Management Teams: <ul style="list-style-type: none"> - Standard agenda item for dissemination of Practice Briefs. • Practice Days (supported/delivered by Interchange Managers and Senior Case Managers). The Practice Days will be developed to engage Case Managers and to enable the application of learning from formal training into practice through a variety of approaches: <ul style="list-style-type: none"> - Scheduled monthly, attendance of Case Managers and Senior Case Managers will be monitored. The monthly sessions will cover topics such as: <ul style="list-style-type: none"> ▪ Purposeful Home Visits ▪ Professional Curiosity ▪ Active Safeguarding and Public Protection ▪ Purposeful Reviews with a focus on addressing vulnerability/risk of harm ▪ Working with partners to safeguard vulnerable people. <p>This list will be dynamic according to the feedback from operational staff following formal training.</p> • Training Schedule: <ul style="list-style-type: none"> - High Level Training Programme to be developed for Merseyside and Cheshire & Greater Manchester CRCs. 	<p>Interchange Managers</p> <p>Business Project Manager / Interchange Managers</p> <p>Community Director</p>	<p>Completed</p> <p>To be set up by December 2018</p> <p>December 2018</p>
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			<p>Measuring Progress:</p> <ul style="list-style-type: none"> • Attendance at training for Case Managers is mandatory and attendance monitored. More recently employed Case Managers will be prioritised. • Merseyside CRC quality assures 1-1.5% of the caseload each quarter. Reports detailing outcomes of the audits will be produced and trends in progress monitored. There are specific measures in these reports related to risk of harm, including domestic abuse and safeguarding. • The application and effectiveness of EMO will be evaluated and a report written to advise on progress made and areas for continued improvement. 		
2	Equip all staff with the skills and knowledge necessary to carry out effective work to keep other people safe.	Agreed	<p>Merseyside CRC has dedicated an Interchange Manager (Operational Middle Manager) to coordinate and facilitate training on key aspects of risk of harm practice. Training of Case Managers in aspects of risk and protecting potential and actual victims was a key theme in the Inspectorate Report.</p> <ul style="list-style-type: none"> • Training Schedule: <ul style="list-style-type: none"> - Merseyside CRC High Level Training Programme to be developed. - SARA 3 to be delivered to all Interchange Managers, Senior Case Managers and Case Managers. - Risk of Serious Harm Training to be delivered to all Case Managers. - Domestic Abuse Perpetrator Programme to be delivered to all Case Managers. 	<p>Community Director</p> <p>Community Director, Interchange Managers and Business Project Manager</p> <p>Community Director, Interchange Managers and Business Project Manager</p> <p>Community Director, Interchange Managers and</p>	<p>December 2018</p> <p>November 2018</p> <p>December 2018</p> <p>January 2019</p>



			<ul style="list-style-type: none"> - Interchange Manager Workshop on Effective Supervision and how to embed risk of harm good practice and learning with Senior Case Managers and Case Managers <p>Measuring Progress:</p> <ul style="list-style-type: none"> • Case Manager Checklist Survey Monkey to be completed to evaluate effectiveness of learning and identify future areas of development. • Domestic Abuse Competency Checklist to be completed with all Case Managers. • Attendance at training for Case Managers is mandatory and attendance monitored. More recently employed Case Managers will be prioritised. • Merseyside CRC quality assures 1-1.5% of the caseload each quarter. Reports detailing outcomes of the audits will be produced and trends in progress monitored. There are specific measures in these reports related to risk of harm, including domestic abuse and safeguarding. 	<p>Business Project Manager</p> <p>Community Director, Community Director CGM</p> <p>Community Director CGM, Interchange Manager</p> <p>Community Director CGM, Interchange Manager</p> <p>Community Director CGM, Interchange Manager</p>	<p>January 2019</p> <p>February 2019</p> <p>February 2019</p> <p>February 2019</p>
3	Better involve service users in producing plans that are personal to them.	Agreed	<p>Interchange is the name given to the operating model for Merseyside CRC. It is a model based on the strengths of the service user and demands a collaborative approach to engage service users and make plans personal to them. The Enabling Plan has been rolled out in Merseyside CRC and is being embedded into practice. The Enabling Plan replaces the Initial Sentence Plan in OASys. The Enabling Plan has already been launched in the most recent Interchange Practice Guidance and training.</p> <p>Enablers of Change (EoC) is a new assessment tool which is progressing through accreditation and is due to be rolled out in Humberside & North Yorkshire CRC in October 2018. An Implementation Board is governing the implementation of EoC and in Merseyside a Project Board has been</p>	<p>Interserve and the CRCs</p>	<p>November 2018 April 2019 (roll out across CRCs)</p>



			<p>established to ensure a safe transition from the use of OASys to the use of the new tool.</p> <p>Merseyside CRC will:</p> <ul style="list-style-type: none"> • Monitor and embed the use of the Enabling Plan through completion rates across the CRC. • Implement the EoC assessment tool, which includes co-production at the heart of the Interchange Model and use of technology with service users to ensure co-production of EoC. • Deliver the training package (once it has been developed) according to the roll-out timetable. <p>Measuring Progress:</p> <ul style="list-style-type: none"> • Monitor the use of the Enabling Plan using available data. • Service user feedback through the Service User Council to collate feedback on their experience. • Engagement of service users will show improved scores in the results from quarterly quality assurance activity. 		
4	<p>Make sure that all aspects of case management (for example, desistance, safeguarding, and public protection) are reviewed fully to achieve better outcomes for service users.</p>	Agreed	<p>Merseyside CRC is one of five CRCs led by Interserve. The Governance arrangements for operational practice are led by the Central Interserve Practice Team. Changes to policy and practice are governed through the Change Control Board. Merseyside CRC is embedding the Risk of Harm Guidance, associated training and Enhanced Management Oversight. Practice Development Days will reinforce learning on all aspects of practice, but with focus on risk of harm, protecting victims and potential victims, domestic abuse and safeguarding practices.</p> <p>Merseyside CRC will continue to:</p> <ul style="list-style-type: none"> • Review policies and practice through the Change Control Board and update in accordance with new external guidance as required, including for example Probation Instructions. 	Interserve and CRCs	April 2019



			<ul style="list-style-type: none"> • Develop and embed Quality Assurance and continuous improvement cycle. This includes our Quality Assurance framework (IQAM,) which allows for review of operational practices. • Assure IQAM feedback is evidenced through supervision and appraisal processes, including IQAM scores. • Develop the Rehabilitation Outcomes Framework (IROF) / Balanced Score Card regarding outcomes for service users. <p>Please note the actions detailed in recommendations 1, 2 and 3 are relevant to better outcomes for service users in terms of safeguarding, public protection, desistance and protecting actual and potential victims.</p> <p>Measuring Progress:</p> <ul style="list-style-type: none"> • Merseyside CRC quality assures 1-1.5% of the caseload each quarter. Reports detailing outcomes of the audits will be produced and trends in progress monitored. There are specific measures in these reports related to risk of harm, including domestic abuse and safeguarding. • Presentation of Rehabilitation Outcomes Framework, Balanced Score Card. 	<p>CRC, Community Director and Interchange Manager</p> <p>Interserve and the CRCs</p> <p>Interserve and the CRCs</p>	<p>April 2019</p> <p>April 2019</p> <p>April 2019</p>
5	Strengthen its relationship with sentencers so that information is exchanged more effectively.	Agreed	<p>Merseyside CRC has an established Practice Development Group (PDG) focused on Courts and, although relatively new, it has a well-developed Action Plan. Engagement with Sentencers is identified as an area Merseyside CRC wishes to improve and we are using existing structures to gain access to Sentencers, which includes:</p> <ul style="list-style-type: none"> • Attendance at Court User Group and Probation Liaison Committees. Here Merseyside CRC will make presentations to Sentencers on key areas of practice, share practice initiatives and take feedback to inform future presentations. • Bi-annual meetings between Senior Managers from Merseyside CRC and the Recorder of Liverpool. Merseyside CRC will provide an analysis of Crown Court cases, compliance and completion rates, accredited programme completions and enforcement practices. 	<p>Community Director/ Lead Interchange Managers</p> <p>Community Director/ CEO</p>	<p>December 2018</p> <p>October 2018</p>



			<ul style="list-style-type: none"> • A new database recently implemented by Merseyside CRC, which monitors Court Hearings and allows Senior Case Managers and Case Managers to pass timely information to Courts and Sentencers electronically. • Implementation of NPS briefing to improve quality of written applications to Court. • A Sentencer Engagement Strategy, which is in development and will be embedded. • Development of Rate Card Brochure and Reports for Sentencer Forums. • Opportunities for Sentencers to observe CRC practice. <p>Measuring Progress:</p> <ul style="list-style-type: none"> • Greater satisfaction with Merseyside CRC performance at Court – evidenced through interaction with Senior Managers and feedback from set-piece meetings. • Improved numbers of Sentencers responding to the Merseyside CRC Stakeholder Survey. • Monitor and report on meeting attendance across Courts in Merseyside. • Improved confidence and understanding of Merseyside CRC performance and role in delivering the sentence of the Court. 	<p>Community Director/ Professional Service Centre</p> <p>Interserve and the CRCs</p> <p>Interserve and the CRCs</p> <p>Community Directors</p> <p>Community Director</p>	<p>Completed</p> <p>December 2018</p> <p>January 2019</p> <p>January 2019</p> <p>January 2019</p>
6	Further improve the coordination of resettlement services so as to increase the likelihood of successful community reintegration for released prisoners.	Agreed	Merseyside CRC has, at the time of the Inspection, set out a new model of delivery to deliver this recommendation. Merseyside CRC has appointed designated Resettlement Case Managers and piloted a Case Manager working in HMP Liverpool, being a keyholder of the prion and starting engagement work pre-release. A new specification for Through the Gate provision has been released and a new model, called Integrated Through the Gate (ITTG), has been developed. This model will further enhance, in custody, the engagement of prisoners' pre-release and comes with additional resource.		



		<p>Merseyside CRC will ensure that:</p> <ul style="list-style-type: none"> • Resettlement Case Managers spend time in the prisons on a rota basis working alongside Shelter, the keyworker and other partners. • Resettlement Case Managers hold surgeries in local prisons to target short term prisoners and recall. • We work with partners to target resources at the top 20 revolving door prisoners and build on the success of the HMP Styal Pilot Project. • Where possible we commence the Enabling Plan with service users' pre-release, and hold Induction Groups 'at the gate'. • We increase the use of partners (P3 and mentoring) to ensure 'No Fixed Abode' cases are picked up at the gate and are engaged from the day of release. • We work with Shelter pre-release to ensure Resettlement Plans are continued into the Enabling Plans. 	<p>Community Director CGM, Interchange Managers</p> <p>Community Director CGM, Interchange Managers</p> <p>Community Director/Head of Operations, Interchange Manager, Community Director CGM</p> <p>Community Director/Head of Operations, Interchange Manager, Community Director CGM</p> <p>Community Director/Head of Operations, Interchange Manager, Community Director CGM</p> <p>Community Director/Head of Operations, Interchange Manager, Community Director CGM</p>	<p>Commence October 2018</p> <p>Commence October 2018</p> <p>November 2018</p> <p>November 2018</p> <p>November 2018</p> <p>November 2018</p>
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		<ul style="list-style-type: none"> We implement the new ITTG model, which includes having dedicated managers to drive performance, and administration support, as well as targeted plans for complex cases. We develop and implement the new ITTG model. This specifically includes more interventions and a more integrated approach to management with specialist 'Through the Gate' staff working in and out of the prisons. This is in relation to Merseyside CRC service users who are in Merseyside CRC footprint prisons. <p>Measuring Progress:</p> <ul style="list-style-type: none"> Increase quality assurance outcome scores for 'Through the Gate' provision. Increase percentage of cases receiving prison visit (female service users and Band 3 and 4 men) from 30% to 75%. Increase percentage of cases where the BCST2 (assessment tool prepared by Shelter pre-release) is reviewed by the Case Manager from 7% to 90%. Refer all cases due for release to either P3/CRC mentor or ITTG Team (whichever is the best pathway). 	<p>Central Interserve and pan CRC</p> <p>Central Interserve and pan CRC</p>	<p>To be commenced April 2019</p> <p>To be commenced April 2019</p>
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Recommendations	
Agreed	6
Partly Agreed	0
Not Agreed	0
Total	6

