

Blaenau Gwent & Caerphilly YOS SQS Inspection Improvement Plan 2013/14

Whilst the YOS recognises that there was only one area for improvement split into two sections, we have incorporated wider learning in to this inspection improvement plan.

Area For Improvement	YOS Staff Actions	Management Oversight Actions	Timescales	Progress/Comments
<u>Reducing the Likelihood Of reoffending (LOR)</u>				
Ensure assessments are timely and of good quality.	<p>Staff to ensure that actions identified via the QA processes are completed.</p> <p>QA documents to be completed in a timely manner.</p> <p>All assessments must be reviewed at the correct stages and amended accordingly.</p> <p>All assessments must include information relating to past offending and harmful behaviour.</p> <p>Ensure all previous and current relevant information is included in all assessments to inform accurate risk level decision making. This includes</p>	<p>Team Managers to dip sample QA forms and cross reference with Asset.</p> <p>YOS Management team will share the information and findings from the Assessment Review Group.</p> <p>Dip sampling by Team Managers, discussion and oversight in supervision sessions regarding risk levels. Recording regarding such discussion must be entered onto YOIS.</p> <p>YOS Management Team to complete Safeguarding and full case audit as per the QA processes to ensure quality.</p>	December 2013	In progress

	<p>safeguarding.</p> <p>Evidence must be recorded for reductions or increases in risk levels. This includes how elements of the plan have been tailored to reflect the reductions/increases.</p>			
<p>Ensure plans are timely and of good quality.</p>	<p>Staff to ensure that plans state who will be doing what, the purpose of the task i.e. goal/outcome, and also within what time frame e.g. 12 sessions of substance misuse over the following 6 months.</p> <p>Case Managers must identify an Independent Reviewing Officer and ensure all review dates are recorded in the process box.</p> <p>All ROSHs must include information relating to past offending and presenting behaviour and how the behaviour will be addressed and managed.</p> <p>Plans should reflect the areas of concern highlighted in Asset.</p> <p>Ensure initial and review</p>	<p>Team Manager to dip sample Plans and cross reference what is on the system with the QA form.</p> <p>Plans will also be dip sampled within supervision and team meetings for shared learning.</p>	<p>September 2013</p>	<p>Completed and ongoing</p>

	signed plans are in paper file for all interventions. Team has process in place whereby a paper plan is completed at all reviews, and then placed on the file.			
Ensure all PSR's evidence young peoples vulnerability and risk of harm to others.	Staff to ensure welfare needs are separated from the risks associated with offending.	PSR gatekeeping form has been revised. Team Manager to gatekeep all PSRs were custody is stated as inevitable by the courts Team Manager to dip sample PSRs as part of the QA process. Team Manager to dip sample magistrate's feedback forms regarding quality of reports.	September 2013	Completed and ongoing
Ensure a case diary entry is always completed when a verbal update or progress report is provided at court.	All YOS practitioners attending youth court must record outcomes /decisions in respect of sentences being imposed. It has to be noted if a progress report, breach report or PSR has been provided to the court. Furthermore, there needs to be a record of the Bench's reasoning, also a note to say if the YOS addressed the bench,	Team Manager to dip sample that staff record court outcomes accurately.	September 2013	Completed and ongoing

	<p>gave any verbal updates etc.</p> <p>Progress report needs to be copied into the case diary, or within the report section of YOIS, as paper copies can get lost, and therefore no evidence to support recording that the young person was sentenced with a report.</p> <p>The recording needs to be done either on the day in court, or as a priority the following morning.</p>			
<p><u>Protecting The Public, Safeguarding and Ensuring The Sentence Is Served.</u></p>				
<p>Create a template for Victim Safety Assessments and ensure information therein is included in all assessments.</p>	<p>YOS Victim Liaison Officers (VLOs) to ensure a victim safety assessment is completed on all cases within 72 hours of referral to the YOS.</p> <p>VLOs to ensure that completed victim safety assessments are shared with all assessing officers within 72 hours of referral to the YOS.</p> <p>YOS staff to ensure that</p>	<p>YOS Management Team to create a victim safety assessment template.</p> <p>Team manager signing Risk Of Serious Harm (ROSH), Vulnerability Management Plan (VMP)/Risk Management Plan (RMP) to ensure that victim safety is always addressed.</p>	<p>June 2013</p>	<p>Completed and ongoing</p>

	<p>information contained within the victim safety assessment is included in all relevant assessments and plans.</p> <p>Case Managers must inform Victim Liaison Officers of release dates for Hone Detention Curfew /Parole/Released On Temporary Licence.</p> <p>VLOs to record all contact with victim in the YOIS Intervention page.</p>			
<p>When risk levels at initial, review and end stages of assessments and plans require management oversight a discussion must be held with the relevant manager prior to countersignature. (Including safeguarding)</p>	<p>All case managers to book a time slot with a Team Manager to discuss case in person when requesting countersignature.</p>	<p>This process is now in situ, and Team Manager only signs after discussion with the Case Manager.</p>	<p>June 2013</p>	<p>Completed and ongoing</p>
<p>RMP's & VMP's must be a summary of what is in place, what you will be addressing and how. The bottom box regarding "increases" should not state, "call a meeting" or "refer to risk panel" etc. It should</p>	<p>All staff to ensure that plans reflects actions required to manage or reduce risk and vulnerability.</p>	<p>Team Manager must only countersign plans if those particulars have been included. This will be taken care of via discussions with case managers.</p>	<p>June 2013</p>	<p>Completed and ongoing</p>

state action that needs to be taken by agencies to manage the increase in risk.				
Scrutiny must be strengthened when signing ROSH's to ensure Multi Agency Public Protection Arrangements (MAPPA) levels are accurately recorded.	Case Managers to be diligent in recording MAPPA eligibility in assessment	Team managers to be diligent of MAPPA eligibility when signing ROSHs.	August 2013	Completed and ongoing
Update Court monitoring form to reflect primary language choice.	N/A	YOS Management Team to ensure that court monitoring form is reviewed and revised and agree new format with other Gwent YOS's	June 2013	Completed
Ensure robust enforcement is undertaken on all cases including the use of compliance panels.	Staff members to ensure all relevant cases are referred to compliance panels.	Team Manager or Senior Practitioner to chair the compliance panels. Prior to any breach proceedings, Team Manager will check that Compliance Panel has been undertaken.	July 2013	Completed
Provide Speech, Language, and Communication Needs training for YOS staff.	To attend training course when nominated	To identify and commission appropriate training	31 December 2013	In progress
QA processes must be robustly applied and completed in a timely	All YOS staff to ensure the QA process is followed	YOS Management Team to ensure compliance with the YOS QA process	July 2013	Completed and ongoing

manner and with diligence.				
Ensure that reviews are undertaken of assessments and associated plans prior to transferring cases to Probation.	Court and assessment team to devise a process whereby the information will be reviewed/audited prior to transfer.	Team Manager will conduct this audit with case manager.	October 2013	Outstanding
Ensure reports to Bureau, Panels and Court are succinct, analytical and fit for purpose.	Report writers to ensure that relevant information in reports is included in a succinct manner.	Team Manager to dip sample QA forms, to ensure that this is happening.	August 2013	Completed and ongoing

The YOS also recognises the importance of maintaining, sustaining and improving the strengths identified in the Inspection findings.

The YOS was described as “performing well” and our areas of strengths included our engagement with parents/carers and the Inspectors were pleased with the majority of cases in most aspects of our work.

It was also noted that there has been a substantial improvement in practice since the previous inspection.

Considerable improvement was seen in our work to safeguard young people and protect the public and our assessments to reduce the likelihood of reoffending were “good” in all cases. Therefore we will also work to ensure that our practice regarding our strengths also continues.

Plan creation date: 16th July 2013

First review date: 16th September 2013

Second review date: 2nd December 2013