

SCHEDULE F: PERFORMANCE AND MONITORING MECHANISM

PART 1: DEFINITIONS

In this Schedule, unless the context otherwise requires, any definitions of capitalised terms are in Schedule A (Definitions) of this Contract.

PART 2: MANAGEMENT INFORMATION REPORTING REQUIREMENTS

- 1.1 The Provider shall provide to the Authority the Management Information in accordance with the timescales listed in the tables within Appendix A (Management Information Reporting Requirements).
- 1.2 In addition the Provider shall provide to the Authority all other information required under this Contract or which is deemed necessary by the Authority in relation to this Contract.
- 1.3 The Provider shall provide to the Authority a report of any issues of concern and of matters that may become of ministerial interest or may have media interest immediately upon becoming aware of such matters or upon the Authority's request.

PART 3: AUTHORITY'S CONTRACT PERFORMANCE REPORTING REQUIREMENTS

2. Introduction

- 2.1 The Provider shall provide the Services to the standard set in the Service Specification (Schedule B of this Contract) including so as to meet the Required Standard, and the Parties are committed to working together to achieve continuous improvement in performance.
- 2.2 The Contract Delivery Indicators shall be construed and measured in accordance with the measurement methodology and definition requirements set out in Appendix B (Contract Delivery Indicators). Each Contract Delivery Indicator shall apply from the relevant start date specified in Appendix B (Contract Delivery Indicators).
- 2.3 The Authority will endeavour to provide information to the Provider about the Employment and related outcomes achieved by Prisoners allocated to the Workshops in order to inform delivery, continuous improvement and service planning by the Provider and other partners working to improve rehabilitation outcomes.
- 2.4 The Provider shall, at the Authority's request, provide to the Authority any information it obtains in relation to the Employment and related outcomes achieved by Prisoners allocated to the Workshops.



3. Performance Report

- 3.1 The Authority shall measure the Provider's performance in the delivery of the Services against the Contract Delivery Indicators by reference to the Management Information.
- 3.2 The Provider shall report to the Authority its performance in the delivery of the Services against the Contract Delivery Indicators in the Management Information.
- 3.3 The Provider shall provide to the Operational Management Group at least five (5) Working Days before each Operational Management Group Meeting a report on its delivery of the Services in the preceding month and its anticipated delivery of the Services in the next month. The report shall include any issues which need resolution in order to enable service delivery and service improvement.
- 3.4 The Provider shall provide to the Contract Review Group at least five (5) Working Days before each Contract Review Group Meeting a report on its delivery of the Services in the preceding quarter and its anticipated delivery of the Services in the next quarter. The report shall include any issues which need resolution in order to enable service delivery and service improvement.
- 3.5 The Provider shall provide to the Service Integration Group at least five (5) Working Days before each Service Integration Group Meeting a report on any issues which need resolution in order to enable service delivery and service improvement.
- 3.6 The Authority may, following discussions with the Provider, provide notice to the Provider to add to, delete or amend any of the Contract Delivery Indicators, in which case the procedure set out in Schedule I (Change Mechanism) shall apply.
- 3.7 The Authority will make available to the Provider and its contract management team within five (5) Working Days of the end of the relevant Month reporting on the allocation and attendance of Prisoners in the Workshops in the preceding Month including in respect of each Core day during that Month:
 - 3.7.1 the number of Prisoners allocated to the Workshops;
 - 3.7.2 the number of Prisoners who did not attend the Workshops (or the hours they did not attend in the case of partial attendance) due to Authorised Absences; and
 - 3.7.3 the number of Prisoners who did not attend the Workshops (or the hours they did not attend in the case of partial attendance) due to Unauthorised Absences.

4. Monthly Management Information Report

4.1 The Provider shall submit to the Authority the Monthly Management Information Report no later than five (5) Working Days after the end of each Month from the Service Commencement Date containing the information set out in section 2 of Appendix A (Management Information Reporting Requirements).



- 4.2 The Monthly Management Information Report shall include details of the Provider's performance against the relevant Contract Delivery Indicators and identify any occurrences of Reduced Performance with the Provider's assessment of the reasons for such occurrences.
- 4.3 In light of the Provider's assessment of its performance as stated in the Monthly Management Information Report or in any other Management Information, the provisions of paragraph 8 (Improvement Notices and Improvement Plan) shall apply (as relevant) on the basis of such assessment.
- Where the Authority considers it is reasonable, in light of the Provider's assessment of its performance against any of the Contract Delivery Indicators or the occurrence of any Reduced Performance and/or Default, it may issue an Outstanding Issues Notice in accordance with paragraph 10 (Consultation) and the provisions of paragraph 10 (Consultation) shall apply.
- If and to the extent that any Outstanding Issues are not resolved in accordance with paragraph 10 (Consultation), the Authority shall notify the Provider of its final assessment of such performance, and the provisions of paragraph 8 (Improvement Notices and Improvement Plan) shall apply (as relevant) on the basis of such assessment.
- The Authority's Group Members and the Provider's Group Members shall meet at the monthly Operational Management Group Meeting to discuss the Provider's performance, any relevant reports and Management Information, open Improvement Plans and any problems or issues requiring decision or escalation. The Authority and the Provider shall agree and formally record the necessary actions arising from such meeting.
 - 4.7 The Provider shall ensure that it provides the Authority with all required information prior to the Group Meetings (including the reports described in paragraphs 3.3 3.5 (Performance Reporting)) and shall arrange for a written record of all Group Meetings to be made and sent to the Authority for review and Approval within five (5) Working Days of the relevant Group Meeting. Following Approval of such records, at the next relevant Group Meeting, the record shall be accepted as a true representation of the discussions and resolutions which have taken place and a copy of such record shall be retained by both Parties.

5. Reduced Performance

5.1 If the Authority considers (acting reasonably) that there are any instances of Reduced Performance by the Provider or the Sub-contractors, the Authority may issue an Improvement Notice in accordance with paragraph 8 (Improvement Notices and Improvement Plan).

6. Bedding-In Period

6.1 In respect of those Contract Delivery Indicators where there is a related Bedding-In



Period, the Authority shall not issue any Improvement Notices during the relevant Bedding-In Period.

7. Provider's obligations during Bedding-In Period

- 7.1 Notwithstanding the provisions of paragraph 6 (Bedding-In Period), during the Bedding-In Period the Provider shall not be relieved of any of its obligations under this Contract.
- 8. Improvement Notices and Improvement Plan
- 8.1 In the event of Reduced Performance the Authority may issue an Improvement Notice to the Provider.
- 8.2 In addition to paragraph 8.1 (Improvement Notices and Improvement Plan), the Authority may issue an Improvement Notice to the Provider where there is a Default by the Provider (or any of the Sub-contractors) in relation to any aspect of the provision of the Services whether or not there are related Contract Delivery Indicators.
- 8.3 An Improvement Notice shall state:
 - 8.3.1 any area of Reduced Performance or the nature of the occurrence of the Default; and
 - 8.3.2 any other supporting information which the Authority considers to be relevant.
- 8.4 Within ten (10) Working Days of the date of issue of an Improvement Notice the Provider shall issue a proposed Improvement Plan to the Authority which shall:
 - 8.4.1 provide an explanation of the causes of the Reduced Performance;
 - 8.4.2 identify the Improvement Actions;
 - 8.4.3 set out:
 - 8.4.3.1 the Provider's proposals for carrying out the Improvement Actions;
 - 8.4.3.2 a programme for undertaking the Improvement Actions; and
 - 8.4.3.3 the date by which the Improvement Actions will be completed;
 - 8.4.4 identify any actions or consents required from the Authority or any Authority Related Party to facilitate the Improvement Actions (where these activities do not form part of the Provider's obligations under this Contract);
 - 8.4.5 not increase cost or risk to the Authority; and



- 8.4.6 propose criteria for the purpose of auditing completion of the Improvement Actions and the remedying of the Reduced Performance and/or Default (to include an appropriate period of time to monitor the stability of the remedy).
- 8.5 Following receipt of a proposed Improvement Plan, the Authority may (acting reasonably):
 - 8.5.1 agree it; or
 - 8.5.2 reject it and require the Provider to submit a revised Improvement Plan within five (5) Working Days of such rejection (or such other time as may be agreed by the Parties in writing).
- Where the Provider fails to submit a revised Improvement Plan in accordance with paragraph 8.5.2 (Improvement Notices and Improvement Plan) or the revised Improvement Plan is in the Authority's reasonable opinion unacceptable, the Authority may issue an Outstanding Issues Notice in accordance with paragraph 10 (Consultation) and the provisions of paragraph 10 (Consultation) shall apply.
- 8.7 The Provider shall implement all of the Improvement Actions by the date specified in any Improvement Plan at no cost to the Authority.
- 8.8 An Improvement Plan shall remain open until the Improvement Actions identified therein have been completed to the Authority's satisfaction, whereupon it shall be closed.
- Where the Improvement Actions are carried out and completed but do not remedy the Reduced Performance and/or Default identified in the Improvement Notice or do not prevent its re-occurrence or the Provider fails to complete the Improvement Actions in an Improvement Plan by the date specified in it for their completion or to the Authority's satisfaction, the Authority may issue an Outstanding Issues Notice in accordance with paragraph 10 (Consultation), in which case the provisions of paragraph 10 (Consultation) shall apply.
- 8.10 Each Improvement Plan shall be sequentially numbered from a central register maintained by the Authority. In the event that a further unconnected circumstance occurs which results in the issue of a separate Improvement Notice, a separate Improvement Plan shall be raised and recorded in the central register under a separate sequential number.
- 8.11 A report on progress against each open Improvement Plan shall be provided within the reports to the Governance Groups set out at paragraphs 3.3 3.5 (Performance Reporting).
- 8.12 The Authority may:
 - 8.12.1 request a meeting with the Provider to discuss progress against any open Improvement Plan by giving not less than two (2) Working Days' notice to the Provider; and



8.12.2 set out the frequency for meetings with the Provider to review open Improvement Plans during the Approval process for Improvement Plans.

9. Rectification

- 9.1 If an Outstanding Issues Notice is issued where:
 - 9.1.1 the Provider fails to submit a revised Improvement Plan in accordance with paragraph 8.5.2 (Improvement Notices and Improvement Plan) or the revised Improvement Plan is, in the Authority's reasonable opinion, unacceptable;
 - 9.1.2 Improvement Actions are carried out and completed but do not succeed in remedying the Reduced Performance identified in the Improvement Notice or in preventing its re-occurrence as described in paragraph 8.9 (Improvement Notices and Improvement Plan); or
 - 9.1.3 the Improvement Actions in an Improvement Plan are not completed by the date specified or to the Authority's satisfaction in accordance with paragraph 8.11 (Improvement Notices and Improvement Plan),

and any of the Outstanding Issues are not resolved pursuant to paragraph 10 (Consultation), the Authority may at its sole discretion:

- 9.1.4 agree an extension to the Improvement Plan;
- 9.1.5 agree a revised Improvement Plan; or
- 9.1.6 issue a Rectification Notice in respect of such Outstanding Issues.
- 9.2 Following receipt of a Rectification Notice, the Provider shall within ten (10) Working Days of the date of its issue (or such other time as may be agreed by the Parties in writing) provide a Rectification Plan to the Authority which shall set out the Rectification Actions, the Provider's proposals and programme for undertaking the Rectification Actions and the date by which they will be completed.
- 9.3 On receipt of a Rectification Plan the Authority may:
 - 9.3.1 agree it; or
 - 9.3.2 reject it and require the Provider to submit a revised Rectification Plan within five (5) Working Days of such rejection (or such other time as may be agreed by the Parties in writing).
- 9.4 If:
 - 9.4.1 the Provider fails to submit a revised Rectification Plan in accordance with paragraph 9.2 (Rectification); or



- 9.4.2 the revised Rectification Plan is in the Authority's reasonable opinion unacceptable; or
- 9.4.3 within twenty (20) Working Days of a Rectification Plan (or a revised Rectification Plan) being agreed the Provider fails to carry out or complete the Rectification Actions in accordance with the Rectification Plan, or in the Authority's reasonable opinion fails to make substantial progress with the Rectification Actions,

the Authority may in its sole discretion:

- 9.4.4 agree an extension to the time for carrying out and completing the Rectification Actions;
- 9.4.5 agree a revised Rectification Plan; or
- 9.4.6 terminate the Contract in accordance with clause 54.1 (Termination on Default) of this Contract.

10. Consultation

10.1 Where:

- 10.1.1 the Authority considers it is reasonable, in light of the Provider's assessment of its performance against any of the Contract Delivery Indicators or the occurrence of any Reduced Performance and/or Default in accordance with paragraph 4.4 (Monthly Management Information Report);
- 10.1.2 the Provider fails to submit a revised Improvement Plan in accordance or the revised Improvement Plan is in the Authority's reasonable opinion unacceptable in accordance with paragraph 8.6 (Improvement Notices and Improvement Plan); or
- 10.1.3 Improvement Actions are carried out and completed but do not succeed in remedying the Reduced Performance and/or Default identified in the Improvement Notice or in preventing its re-occurrence as described or the Improvement Actions in an Improvement Plan are not completed by the date specified or to the Authority's satisfaction in accordance with paragraph 8.9 (Improvement Notices and Improvement Plan),

the Authority may issue an Outstanding Issues Notice to the Provider identifying the Outstanding Issues and the Parties shall in good faith attempt to resolve such Outstanding Issues.

10.2 If the Parties fail to reach agreement in resolving the Outstanding Issues within ten (10) Working Days of the date of the Outstanding Issues Notice (or such other time as may be agreed by the Parties in writing), the Provider shall within two (2) Working Days of the expiry of the ten (10) Working Day period, issue a Consultation Notice to



the Consultation Nominees to which a copy of the Outstanding Issues Notice shall be annexed, and shall at the same time provide the Authority with a copy of the Consultation Notice. If the Provider fails to do so within the specified time, the Authority may issue a Consultation Notice containing the required information, providing a copy to the Provider.

- 10.3 Within five (5) Working Days of the date of issue of the Consultation Notice (or such other time as may be agreed by the Parties in writing), each Party may produce a concise and unambiguous statement of any matters it considers relevant to the Outstanding Issues, which shall be considered by the Consultation Nominees.
- 10.4 Within ten (10) Working Days of the date of the Consultation Notice, the Consultation Nominees shall meet and attempt in good faith to resolve the Outstanding Issues.
- 10.5 Where the Consultation Nominees are able to resolve the Outstanding Issues or any part of them, they shall produce a statement of such resolution and any agreed actions, and the Parties shall carry out and complete such actions.
- Where and to the extent that the Consultation Nominees are unable to resolve the Outstanding Issues or any part of them within twenty (20) Working Days of the date of the Consultation Notice for any reason, paragraphs 4.1 (Monthly Management Information Report) and/or paragraph 9.1 (Rectification) (as relevant) shall apply.



Appendix A - Management Information Reporting Requirements

1. Plans and Reports

The Provider shall prepare the following reports and plans at the frequency, and by the dates, specified below and in such format as is agreed by the Parties during the Mobilisation Period. All reports shall be provided electronically (unless otherwise requested by the Authority) and be able to export data in XML format.

Plan or Report	Frequency	Date Required
Asset Register	On-going	Initial Asset Register updated before Service Commencement Date. Final Asset Register to be issued before end of Transition Period. An up-to-date Asset Register is to be maintained from Service Commencement Date and updated as and when there are changes to the Assets.
Asset maintenance & Replacement Plan	Twice	Initial Plan to be issued before the Service Commencement Date. Final Plan to be issued before end of Transition Period.
Annual report including: an overview of key achievements; and planned improvement to the provision; and an analysis of benefits realisation.	Annually	From 2018, by 7 th October in each Contract Year.



Plan or Report	Frequency	Date Required
Business Plan	Annually	Provided to the Authority for Approval two months before the Planned Service Commencement Date, and in subsequent years for Approval by 2 nd November.
Annual Service Delivery Plan	Annually	Provided to the Authority for Approval two months before the Planned Service Commencement Date, and in subsequent years in February for Approval by the end of March.
Stakeholder survey (to include the Learning and Skills Provider, the HMP Berwyn senior management team, relevant CRCs, health providers, the Authority's Personnel and other stakeholders)	Annually	From 2018, by 2 nd November in each Contract Year so as to inform the Annual Service Delivery Plan and Business Plan.
Worker engagement survey	Annually	From 2018, by 2 nd November in each Contract Year so as to inform the Annual Service Delivery Plan and Business Plan.
Report to the Authority on the total number of hours of planned work activity during the year from April to March, for NOMS' CU95 Activity Measure.	Annually	Before Service Commencement Date and in January - March each year from 2018.
Monthly Management Information Report (the content of which is detailed in section 2 (Monthly	Monthly	Within five (5) Working Days of the end of each Month from the Service Commencement Date.



Plan or Report	Frequency	Date Required
Management Information Report) of Appendix A)		
The reports for the Governance Groups described in paragraphs 3.3 – 3.5 (Performance Reporting))	As required	At least five (5) Working Days before each of the Group Meetings
Action plans – in response to Self-audit, Service Assurance, HMIP / ESTYN, MQPL, reports, stakeholder surveys and staff/worker engagement surveys.	As required	The Provider is required to contribute to actions plans resulting from HMIP/ ESTYN inspections, MQPL reports, stakeholder surveys and worker engagement surveys.
Health and Safety Reports including risk assessments and Safe Systems of Work	As required	The Provider is required to comply with its statutory Health and Safety responsibilities and to carry out risk assessments and implement Safe Systems of Work. The Authority will request sight of the Provider's reports as and when required.
Fire Safety Reports	As required	The Provider is required to comply with its statutory fire safety responsibilities and to carry out risk assessments and implement Safe Systems of Work. The Authority will request sight of the Provider's reports as and when required.
Provider's Personnel Information	As required	The Authority will request this report as and when required.



Plan or Report	Frequency	Date Required
Maintenance of Records	As required	As and when required. The Authority shall have the right to examine and copy records relating to the provision of the Services in accordance with Schedule D (Audit) of this Contract.
Job Descriptions for any Employment Position	On request	As requested, within timescales agreed by the Parties.
Ad-hoc requests for data or information, as requested by the Authority from time to time.	On request	As requested, within timescales agreed by the Parties.
Financial submission from the Provider and/or Operator to enable the Authority to assess Profit Share to include:	Annually	Within twenty (20) Working Days of the end of each Contract Year
1. The nature of the goods or services being provided over the period;		
2. Who these goods and services are being consumed by;		
3. How the output pricing / value for these goods or services has been determined (e.g. market pricing, competition, ascribed value (accompanied by methodology and calculation); and		



Plan or Report	Frequency	Date Required
4. How input costs have been calculated and giving any detail on changes between quarterly submissions.		
Quarterly information on existing and projected profit share (including information in the form of any template that is provided by the Authority) to help the Authority budget appropriately and spot potential issues early	Quarterly	Within ten (10) Working Days of the end of each relevant quarter

2. Monthly Management Information Report

The Provider shall prepare a Monthly Management Information Report which shall set out the following information and in such format as may be reasonably required by the Authority. It shall be provided electronically (unless otherwise requested by the Authority) and be able to export data in XML format.



ID	Information	Measure
2.a	The total number of Available Employment Positions	Total number of Available Employment Positions on each Core Day in the Month
2.b	The maximum potential number of Core Days	Maximum potential number of Core Days in the Month.
2.c	The Provider's performance against CDIs 1A – 1K in Appendix B	Measures are set out in Appendix B next to the relevant CDIs.
2.d	Number of Prisoners attending the Workshops	Total number of Prisoner who attend the Workshops in the Month.
2.e	The total number of actual hours of delivered work activity fulfilling duties within Workers' Job Descriptions	Total number of actual hours of delivered work activity in the Month.
2.f	Number of completed Worker Inductions	Number of completed Worker Inductions during the Month.
2.g	Number of Worker Portfolio and Appraisal Records set up	Number of Worker Portfolio and Appraisal Records set up during the Month



ID	Information	Measure
2.h	Number of Workers for whom personal skills objectives have been set	Number of Workers for whom personal skills objectives have been set during the Month. Starting with the skills assessment provided by Learning and Skills Provider, the Provider needs to set skill development objectives, and show quantified skill levels e.g. level 1, 2 etc.
2.i	Evidence of progress in development of Employability Skills	Number of Prisoners with improved, static or lower quantified level of Employability Skills during the Month as assessed in any review by the Learning and Skills Provider during this Month and showing what their level was before the review.
2.j	Appraisals completed and recorded	Number of appraisals (which must be completed at least every 3 months) and recorded in the Worker Portfolio and Appraisal Record with any changes to targets and objectives
2.k	Recommendations for individual Workers for future Employment Positions	Number of recommendations made for individual Workers for future Employment Positions
2.1	Worker Portfolio and Appraisal Records disclosed to the appropriate CRC and Learning and Skills Provider once Workers are within the Resettlement Window	Number of Worker Portfolio and Appraisal Records disclosed to the appropriate CRC and Learning and Skills Provider once Workers are within Resettlement Window
2.m	Worker Portfolio and Appraisal Records appropriately transferred to the receiving CRC when Prisoners leave HMP Berwyn	Number of Workers whose Worker Portfolio and Appraisal Records have been appropriately transferred to the receiving CRC when leaving HMP Berwyn



ID	Information	Measure
2.n	Staffing Profile	Staffing profile per Workshop on each Core Day showing any day when there are insufficient Provider's Personnel to carry out adequate supervision and to deliver the Services
2.0	Employment Positions affected, if any, by the expiry and/or termination of the Provider's and/or its Operators' and/or any Third Party Operators' contracts/agreements with third parties for the sale of goods produced and/or services provided in the Workshops	Number of Employment Positions affected, if any, by the expiry and/or termination of the Provider's and/or its Operators' and/or any Third Party Operators' contracts/agreements with third parties for the sale of goods produced and/or services provided in the Workshops.
2.p	Evidence of work undertaken by Workers following the expiry and/or termination of the Provider's and/or its Operators' and/or any Third Party Operators' contracts/agreements with third parties for the sale of goods produced and/or services provided in the Workshops	Where the Provider is able to continue to deliver the Employment Positions, evidence of the work undertaken by Workers to support the delivery of Employability Skills.
2.q	Report on compliance with the Equality Act 2010 including reasonable adjustments and compliance with the NOMS Welsh Language Scheme.	To include as a minimum: a) Number of Workers for whom reasonable adjustments have been made and brief details; and b) Number of Workers for whom Welsh Language services have been provided and brief details.



Appendix B - Contract Delivery Indicators (CDIs)

- 1. The Provider shall carry out relevant calculation set out in the 'Measure of CDI' column in respect of each of the CDIs at 1A 1K below, which shall be included in the Monthly Management Information Report as set out in paragraph 4.2 of this Schedule.
- 2. The figure resulting from each of these calculations shall represent a % which, if lower than the corresponding % within the 'Performance Target' column (the Required Standard), shall constitute Reduced Performance.
- 3. If the Provider fails to meet the required % score and % improvement (the Required Standard) in respect of CDI 1L below, this shall also constitute Reduced Performance.



ID	CDI Description	Measure of CDI	Performance Target	Reporting Frequency	Start Date
1A	Available Employment Positions on each Core day during the Transition Period to meet the Authority's requirement for that Core Day in accordance with the Authority's Ramp-up Plan	For each Core Day in the Month: 100 x Number of Available Employment Positions Number of Available Employment Positions the Provider is required to provide on that Core Day	100%	Each Month	From Service Commencement Date
1B	520 Available Employment Positions on each Core day from the end of the Transition Period	For each Core Day in the Month: 100 x Number of Available Employment Positions ÷ 520	100%	Each Month	From end of the Transition Period
1C	Workers in Available Employment Positions fulfilling duties within their Job	For each Core Day in the Month: 100 x Number of Workers in Available Employment Positions fulfilling duties within their Job Descriptions on that Core Day ÷	100%	Each Month	From Service Commencement Date



ID	CDI Description	Measure of CDI	Performance Target	Reporting Frequency	Start Date
	Descriptions on every Core day	Number of Available Employment Positions the Provider is required to provide on that Core Day			
1D	Worker attendance net of Unauthorised Absences	100 x Number of Prisoners attending Workshops + not attending Workshops due to an Authorised Absence in Month ÷ Number of Prisoners allocated to Workshops by HMP Berwyn in Month	95%	Each Month	3 months from the end of the Transition Period
1E	Started Worker Inductions	100 x Number of Worker Inductions started on the first day of Workers' arrival in the Workshops in Month ÷ Number of Workers starting in Workshops in Month	95%	Each Month	From Service Commencement Date
1F	Completed Worker Inductions	100 x Number of Worker Inductions completed in Month ÷	95%	Each Month	From Service Commencement Date



ID	CDI Description	Measure of CDI	Performance Target	Reporting Frequency	Start Date
		Number of Workers starting in Workshops in Month			
1G	Worker Portfolio and Appraisal Record has been set up	100 x Number of Worker Portfolio and Appraisal Records set up within 10 days of Workers first arriving in Workshops in Month ÷ Number of Workers starting in Workshops in Month	95%	Each Month	From Service Commencement Date
1H	Worker's personal skills objectives have been set. Starting with the skills assessment provided by the Learning and Skills Provider, the Provider needs to set skill development objectives, and show quantified skill level e.g. level 1, 2 etc.	100 x Number of Workers for whom personal skills objectives have been set (as recorded in the Worker Portfolio and Appraisal Record within 10 days of receiving the Learning and Skills assessment) in Month	95%	Each Month	From Service Commencement Date ("SCD").



ID	CDI Description	Measure of CDI	Performance Target	Reporting Frequency	Start Date
11	Appraisals completed at least every 3 months and recorded in the Worker Portfolio and Appraisal Record with any changes to targets and objectives.	100 x Number of Workers for whom there is evidence of appraisals completed and recorded in the Worker Portfolio and Appraisal Record in Month	95%	Each Month	3 months after Service Commencement Date
1J	Disclosure of the Worker Portfolio and Appraisal Record to the appropriate CRC and Learning and Skills Provider once within the Worker's Resettlement Window	100 x Number of disclosed Worker Portfolio and Appraisal Records in Month	95%	Each Month	From Service Commencement Date



ID	CDI Description	Measure of CDI	Performance Target	Reporting Frequency	Start Date
1K	Worker Portfolio and Appraisal Record transferred to receiving CRC when Prisoners leave HMP Berwyn	100 x Number of Workers whose Worker Portfolio and Appraisal Record has been transferred to receiving CRC in Month when leaving HMP Berwyn	95%	Each Month	From Service Commencement Date



ID	CDI Description	Measure of CDI		Performance Target	Reporting Frequency	Start Date	
1L	Self-assessment as to whether Employment Position within Workshop at HMP Berwyn will help Prisoner when they leave Prison.	of question on line "For those who had o you think that a. Education b. employm c. Employm d. Employm	es: ave taken part in the following a at they will help you when you	HMIP survey results against <i>part o</i> ctivities while in this establishment, <i>leave prison</i> :	At least 60% score from HMIP survey with improvement required in next Contract Year as set out in table and in each following Contract Year in line with table until next HMIP survey provides new baseline.	Annually	Following first HMIP survey