Question 1 : Quality Assurance Framework

1.1 Effective processes assuring service delivery to the Services Agreement

A) Quality assurance (QA) arrangements and QA Framework

Interserve will apply its Quality Management System (QMS) to the quality assurance of probation services delivered in accordance with the Services Agreement. The system's components include: quality standards to be reached and maintained, a risk-management system, operational processes and procedures to enable achievement of the standards, performance measurement against the KPIs and targets for service delivery and a continuous improvement model to foster and disseminate good practice and address poor performance (Figure 1). Due to Interserve's integrated approach quality management fits within a business management system that also includes H&S, information security, sustainability etc. The British Quality Foundation Board of Directors awarded its Gold Medal for Excellence to Interserve in 2013 for outstanding and sustained commitment to excellence over a number of years, which provides independent confirmation of the effectiveness of our approach to quality assurance. Entrants are assessed against the EFQM Excellence Model, Europe's leading management framework.

Our overarching QMS framework will be monitored at the highest level via a senior management team process for overseeing four key risks.

- Finance: The Chief of Corporate Services will monitor financial risk from providers and any further contractual or programme financial risks

- Operations: The Chief of Operations (the most senior Community Director) will monitor emerging risks arising from service delivery, including people, partner and supplier risks.

- Supply chain management: Chief of Corporate Services will monitor specific performance and quality of delivery risks relating to management of providers.

- Assurance and performance management: The Chief of Corporate Services (and Performance Manager) will monitor delivery of services against performance and quality measures.

Assurance will include a performance-measurement system owned by our non-operational Performance Manager and comprising a schedule of audits, inspections, management and peer reviews and analysis of performance data (as required in Schedule 9) with active user input. Interserve acknowledges the Authority's ability to require changes to our system up to three months after the Amendment Date (Schedule 9 Para 5.2). Actioning our performance data to disseminate good practice and address poor performance will be handled by our Service Development Panel, led by the Performance Manager and comprising the Practice Development Manager and operational (e.g. Case Managers) and offender representation.

B) Performance management as part of our QA arrangements

B.1) Performance-measurement activity

Delivery against Schedule 9: Our Performance Manager will manage the comparison of our service delivery against the Schedule 9 contract-specific performance measures and various agreed standards of service. Our methodology will include allocating all measures within Schedule 9 to named individuals for accountability. Our review of the measures indicates that 65% will be allocated to the offender's Case Manager. Holding such a level of responsibility across the case performance will promote performance ownership, which will be reinforced by maximising Case Manager continuity for the duration of the sentence. All measures will be reported via our single case-management system (CMS), including quality of engagement, resulting in a single source of performance measurement. Alerts for 'at risk' measures will appear on screens at team and individual level one day before a plan is due for completion until the measure has been met. Performance measure owners will review performance scorecards (team and unit) monthly with their line manager. We will link performance to staff 'records of achievement' with points accrued for performance requirements met and bonuses for high performance levels linked to appraisals.

Audits: The Performance Manager's monthly internal audit schedule will include areas identified

by our Service Development Panel (and those required by external bodies e.g. Prison and Probation Inspectorates) and assessment of an agreed number of randomly selected cases across the CRC. These cases will be assessed for aspects such as: allocation of cases to appropriate staff (e.g. cases flagged by NPS being allocated to Senior Case Managers), correct and full data entry on the CMS, completion of the core Interchange Modules, uptake of the optional Interchange modules and additional services, effective risk assessment, use of the risk register tool, risk management plans, use of the CMS flagging and alert systems, offender contributions (including evidence of self management of risk) and appropriate information sharing. Where practicable, we will conduct joint audits with the NPS. Some of these audits will draw on offenders to participate in the information-gathering exercises e.g. audits reviewing the quality of engagement. Interserve will participate in and provide data access for external audits as agreed with the Authority on themes to be identified on an annual cycle. We acknowledge the Authority's right to audit in accordance with Schedule 15 (Schedule 9 Para 5.3). Any existing QA process in the Authority's specification will be upheld, e.g., our compliance regime will encompass the audit criteria for Accredited Programmes.

Self assessment: All practitioners will self assess using Interserve tools consistent with skills for effective engagement, development and supervision (SEEDS) that feed into the overall performance-measurement system. Offender self-assessment exercises will develop skills in analysis, self reflection, feedback and self improvement.

Peer reviews: Our methodology for monthly peer review of practice aligns with SEEDS principles of. We will require reviews by practitioners from different disciplines and organisations (e.g. from UPW to address case-management practice) to develop wide understanding of practice across teams and to ensure a fresh perspective. Peer reviews will contribute to appraisals and feed into the overall QA rating. Peer reviews of cases will be conducted in monthly practitioner groups.

Manager reviews of cases and sample files: Managers will be required to review an agreed level of targeted case work material as part of ongoing staff supervision. Case reviews will be weighted towards those at the higher levels of risk of serious harm (especially those flagged for possible risk escalation) and will be conducted with the Case Manager. Interserve's methodology will build a cumulative picture of quality across teams and the CPA as a whole that will be used by the Service Development Panel to improve services. Results of such reviews will be considered by the Community Director with responsibility for public protection and will form part of our QA database, which will aggregate findings and scores across all case-based assurance activity. Interserve will have sight of overall quality of performance at CPA level, team level, practitioner level and even offender level. All tools that help to build this overarching picture of quality will be integrated into existing structures such as staff supervision and self assessment, thus minimising additional work. Reviewers will nominate examples of good practice that can be established as beacons of excellence (depending on issues of confidentiality) in the relevant section of WISDOM (our central knowledge library) to celebrate achievement and provide models to guide others' work.

Feedback on service delivery to be used in our continuous improvement model: Offender reviews: Offenders and other users of the service will undertake various QA exercises, with the results being posted in WISDOM. All feedback formats will be accessible online for completion any time, which will enable quick responses and more reflective feedback. Feedback will continue to be provided through existing structures and the Offender Feedback Questionnaire (Schedule 9 Appendix 1), which will be available online and completed in line with Authority-required methodology. Some offenders will be able to apply for specified QA roles via our QA assessor module available for rehabilitative support packages. **Feedback via Encompass:** Encompass, our independent offender user group (managed by User Voice) will provide a non-prescribed assurance role to ensure offenders' views influence the design and delivery of our services and provide opportunities for offender development. Encompass will collaborate with Interserve to conduct QA exercises focusing on areas of concern to offenders. **Our Networks:** Interserve will receive feedback and gather information for the Service Development Panel from its four Networks (offender, Interserve, organisational and community) as described in Schedule 8 Section 10.

Supply-chain: Supply-chain performance will be measured by our supply-chain integrator, 3SC

(see Schedule 8 Section 12) against the same performance standards and criteria as in-house service delivery. Interserve's Partnership Plus model and Charity Charter, together with the 3SC Playbook will specify a performance-management framework that supports our supply chain to achieve high performance. This framework will include how poor performance is managed, quality is assured and best practice is shared within the supply chain. Partnership Plus and the Charity Charter have been proven effective in Interserve and Rehab JobFit's Work Programme contracts, and the 3SC Playbook has proven effective across its public services contracts delivered by VCSE supply chains. 3SC will report on supply-chain performance to our Performance Manager and the Chief of Corporate Services, including: (1) Monthly provider reviews against the six areas in our QMS balanced scorecard (2) Areas of concern reviewed and response agreed (3) Activities to remedy performance and quality issues (4) Agreed monitored improvement plans, reviewed monthly (5) Performance improvements or formal interventions applied with the provider. All performance improvement activity will follow our continuous improvement model (Figure 3).

Staff performance assurance through supervision and appraisals: Staff supervision, working towards annual 360° appraisals (reviewed six monthly), will manage the function of: (1) *Accountability*: assurance of staff performance against required standards and performance targets, focusing on outcomes achieved and drawing on user feedback, audits and case reviews, inspections, serious case reviews etc. (2) *Staff development*: building skills and learning, informed by feedback from practice reviews (3) *Supporting functions*, recognising that staff working closely with offenders need personal support and access to counselling. Our supply chain integrator, 3SC, will confirm that our supply chain is conducting staff appraisals commensurate with Interserve's.

B.2) Performance evaluation activity
The Service Development Panel, reporting to the senior management team, will evaluate performance monthly. The Performance Manager will submit reports to the Authority as per Schedule 9 (monthly and quarterly) in accordance with c39.1(d) of the Agreement. How we will use this performance knowledge is discussed below. These reports will enable the Authority to calculate our Actual Performance, which will be compared quarterly against the Service Levels and Assurance Metrics to calculate that quarter's service credits. Where Actual Performance falls below the Improvement Plan Trigger Level and the Authority requires a root cause analysis and an Improvement Plan, the Performance Manager will manage the process. The Chief of Corporate Services will report on progress of such Plans to the Service Management Group (Schedule 14). Quarterly meetings between operations leads, including the senior manager with public protection responsibility, will review outcomes of reviews and supervision and will review risk referral forms to analyse the effectiveness of our dynamic risk-assessment tool. Performance measure failures will be addressed via improvement plans. Instances of best practice will be disseminated across the contract. Information on our performance will feed into our continuous improvement model.

1.2   Promoting practice improvement over time

A) Vision for knowledge generation and management and use of that knowledge
Interserve's vision for knowledge generation, management and use is depicted in our continuous improvement model (Figure 3). Knowledge of the offenders, their communities and our and other's services across the CPA landscape will be drivers that enable us to better reduce reoffending while protecting the public. The more we know about offenders and how they are impacted by our services, the more effective we can make our services. We have designed systems to enable us to gather, capture, analyse and use such knowledge. Our teams will generate knowledge about our services via all the ways of measuring and evaluating our performance in the previous subsection.

B) Knowledge generation
Collecting and making management information (MI) available: Our CMS will generate reports on our data, enabling the Service Development Panel to identify trends and evaluate the effectiveness of our services (and those providing them) in reducing reoffending and protecting the

public. Our MI will be used as predictive analytics for service development to best meet the requirements. Interserve's CMS and other ICT systems (e.g. HR, finance and estates) will collect the Schedule 20-required data. We will provide all data in electronic format, including Section 6 of Schedule 20 (initially be recorded in hard copy, but then be translated into electronic format).

Network information gathering: The Community Network will provide information about the services that the community requires (particularly from Community Payback) and services that can be offered by individuals (e.g. mentoring) and community organisations. The network will feedback to Interserve about perceived offender progress and the quality of services and how they could be improved. The organisational and Interserve networks will fulfil a similar role, with the former specifically offering information about opportunities for rehabilitation and reparation and the latter providing information about good practice, individual performance and a resource bank of staff skills that can be drawn on to support service delivery. This information will be collected by the Community & User Engagement Manager and fed through, where relevant, to the Service Development Panel. Offender network will focus on feedback about services, ways of improving service quality the the roles offenders can play in delivering Interserve's rehabilitative aims.

Central knowledge library (WISDOM): Knowledge will be stored in our accessible and current central library. WISDOM will hold all modules for the rehabilitative support packages, all practice guidance and the activities of the Networks and the resources they generate. This knowledge will include the CPA Workbank for delivering unpaid work and voluntary offender reparation. WISDOM will include activities that demonstrate good practice and the processes to deliver services.

C) Knowledge management and use (including inspection, audit and SFO review findings)
Using knowledge for service improvement: Any information from the above sources (including MI from our CMS and inspection, audit and SFO reviews) identifying flaws or strong performance in current services will be addressed by the Service Development Panel as part of the assurance process and our continuous improvement model (Figure 3). This information will be reviewed along with information on e.g. projected volumes, changes to offender profiles and sentencing patterns, interchange module quality, module uptake, premises suitability, workforce issues (such as unplanned absence and training), new legislation, supply chain service and other intelligence from our networks to better understand the impact of our activities and those of the offenders on reducing reoffending and risk. Recommendations from the Panel may include changes to the operating model, especially our modular programme and changes to our supply chain. As Interserve is a learning organisation, we will strongly emphasise practitioner involvement at all stages, including self-assessment exercises specifically focused on practice improvement and the provision of peer support throughout the process. The Panel will identify actions required, including any relating to individuals, as well as those requiring systems/policy changes. Knowledge will be placed on WISDOM (Figures 2 and 3), including all inspection/SFO/other reviews (case-based reports will be in the confidential section) alongside the actions taken to address findings. We will engage with the local networks to review management information in Schedule 20 and set expected ranges against each of the measures in consultation with the networks and Encompass.

Evolving operating model: Interserve has designed an operating model (*Interchange*) able to evolve with results of performance analysis and feedback received. Our modular programme maximises this concept by enabling anyone, including offenders, not only to propose changes, but to prepare new sessions that, following approval by the Service Development Panel, will be included as Modules in our 'Directory of Services'. The Practice Development Manager will initially evaluate new material and then submit it to the Panel. Through the Interserve Networks, we will enter dialogue with the local community, offenders and local organisations to ensure we use the opinions of all who use our service to design and deliver it. Feedback and suggestions on improving services will be a source of valuable interaction with the offender and provide an opportunity for the offender to engage in constructive dialogue, which is a skill that will aid further rehabilitation. As Interserve responds by making improvements that are attributed to their source, offenders will be empowered and acquire a sense of ownership.

Transforming Rehabilitation:
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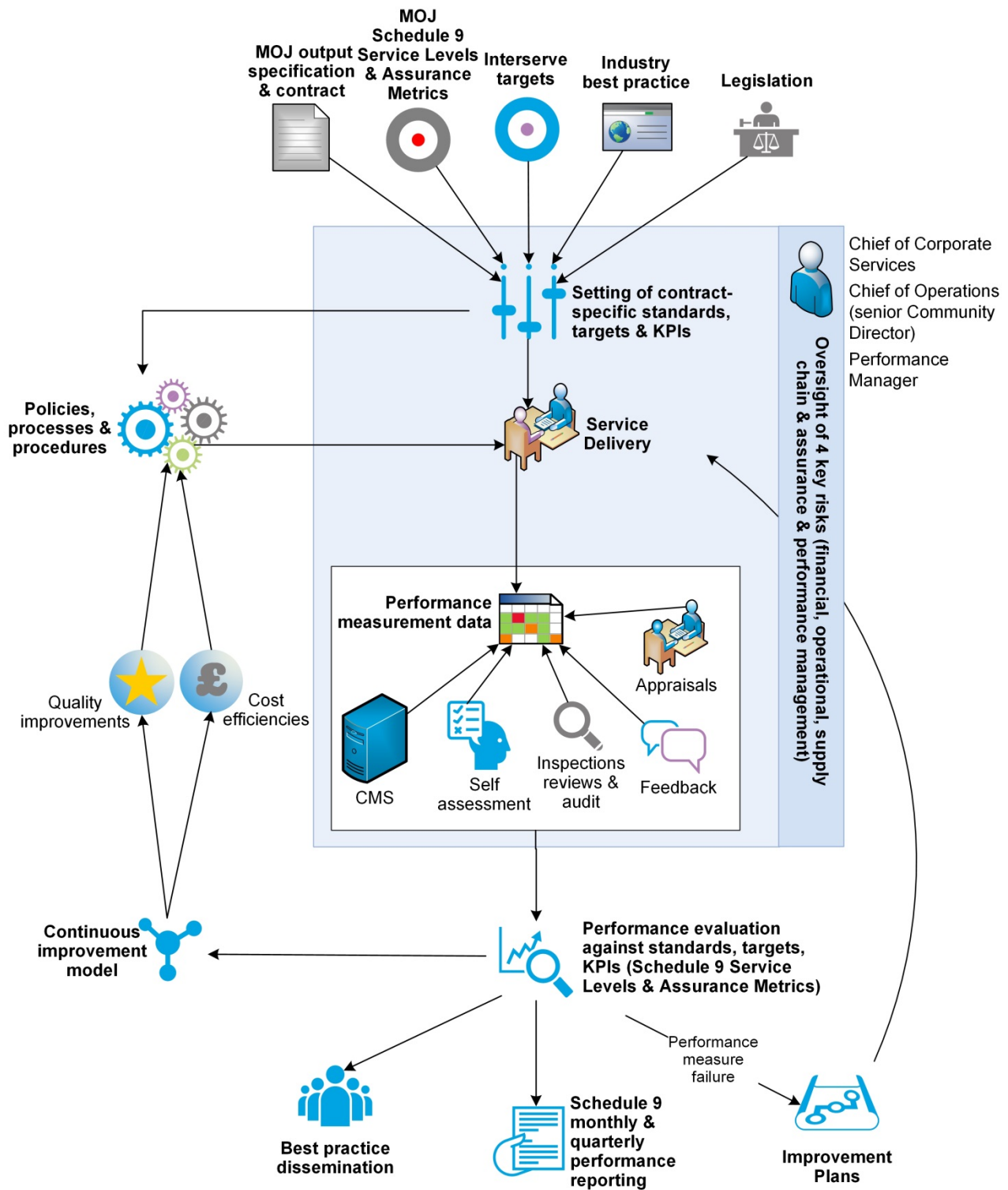*Figure 1 QA framework for TR activity*
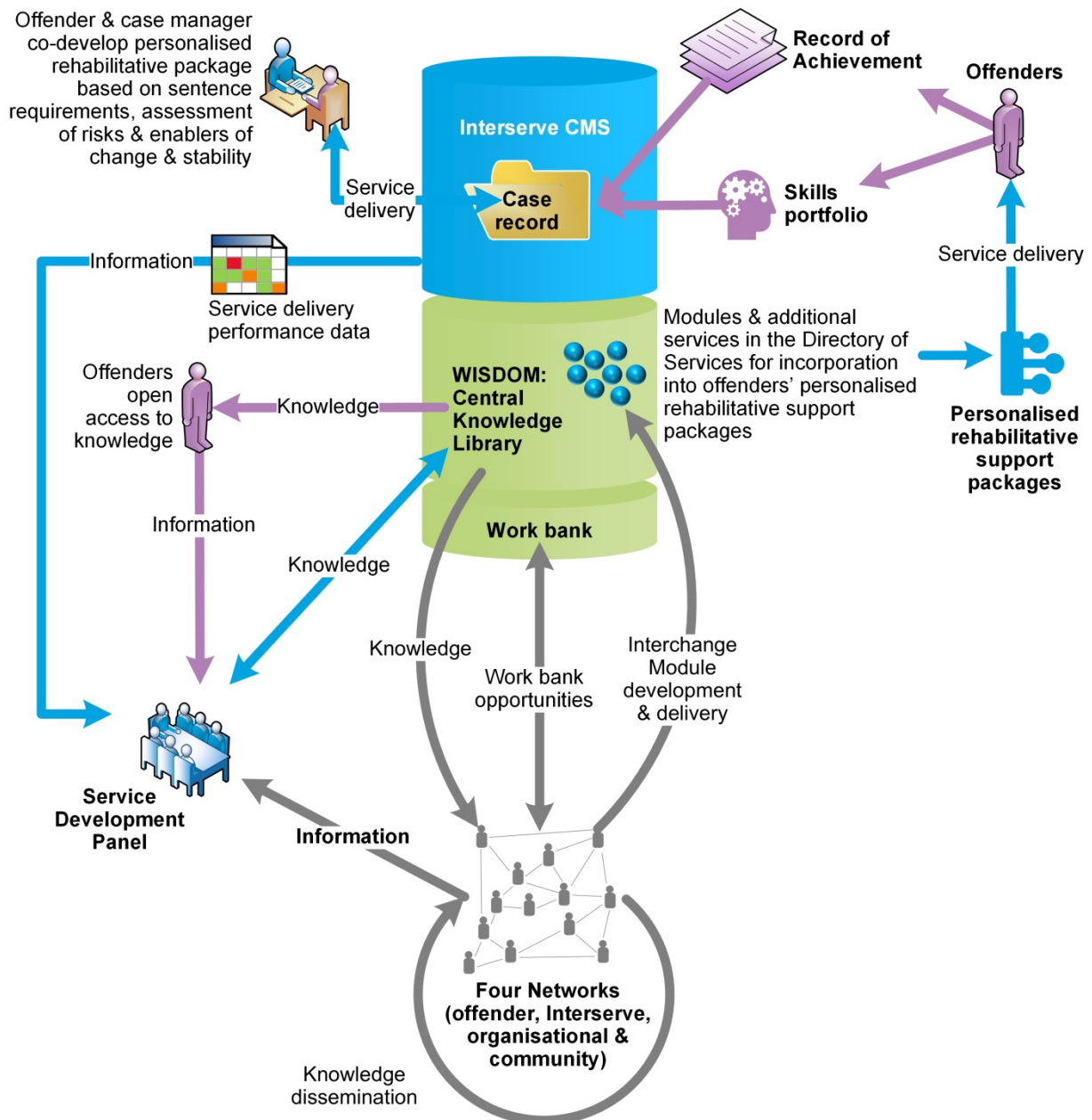
Figure 2 Knowledge management

Figure 3 Continuous improvement model using the findings of inspections, audit and SFO reviews