

RRP have drawn upon the best practice of Ingeus, CRI and St Giles Trust (SGT) to design a Quality Assurance Framework (QAF), which will draw upon the following:

- Ingeus' tried-and-trusted QAF from the DWP Work Programme – the largest payment-by-results contract in Europe. Ingeus' holistic QAF's success is reflected by their industry-leading performance and inspection results – it has the highest mark of any provider inspected by Merlin and an 'Excellent' rating overall; Matrix Standard for Information and Guidance; Ofsted Grade Two; ISO:27001 for information security; and a "Strong" rating from DWP Provider Assurance Team.
 - SGT's Quality Assurance procedures – tailored to deliver in 13 prisons, including through its award-winning Peer Advice project
 - The MoJ's Service Specification, particularly Schedules 7 and 9
 - Knowledge of the stakeholder environment, including the police, courts, victims, communities, voluntary organisations, social and small businesses operating in the sector, education, health and welfare-to-work
- As per Schedule 9 paragraph 5.1, **Diagram 1** provides a high level view of our Quality Assurance Framework (QAF) which will be incorporated in to our service delivery contract. Based on Ingeus' tried and tested approach our QAF will underpin a business-wide culture of *excellence with integrity* which will drive a reduction in reoffending, including:

- Quality objectives aligned with contractual requirements, with clear leadership and management accountability and underpinned by robust policies, standards, procedures and values
- Delivery processes and protocols developed in accordance with proven service excellence methodologies
- Compliance, quality assurance and control processes managed by specialist teams and individuals with clear responsibilities and
- Inspection, assurance and accreditation processes which provide internal and external quality benchmarks

In practice, our QAF will support the following:

- 1) Delivering in accordance with excellent practice, reducing the need for corrective actions
- 2) Monitoring activities (including external inspections and SFO findings)
- 3) Management of identified quality issues
- 4) Knowledge generation and evidence-based service improvement
- 5) Sharing of evidence and new best practice with MoJ

To ensure standardisation, our QAF will apply to both RRP and our supply chain, with suppliers' adherence to the Framework monitored and managed by our Supply Chain Management Team. Responsibility for upholding our QAF will be held at all levels within RRP, but specifically our RRP Quality Team will be comprised of Auditors, Service Design, Service Excellence and Service Improvement sub-teams.

1) Delivering in accordance with excellent practice, reducing the need for corrective actions

Our QAFs most fundamental principle is founded on the RRP ethos that we will seek to promote actively the highest quality in everything we do, thus allaying the need for future remedial actions. We will engage all staff into a culture where quality is promoted at all levels and excellence is celebrated and rewarded. Through training, we will give all our people the right skills and a clear understanding of our expectations, which they will receive the right managerial and systems support to help them achieve. Through recruitment, we will recruit the right people with the right values, specifically to support offenders to transform their lives:

Training and Ongoing CPD: All RRP staff members will have access to industry-leading training and continuing professional development. We will continue to support existing professional development qualifications and training in the first two years. During this time we will seek to develop the wider industry partnerships needed to create a new professional probation apprenticeship structure. We will also set up communities of practice to ensure that staff share best practice and expertise across RRP on a range of topics e.g. engaging offenders. We will offer an Institute of Leadership and Management-accredited Skills Development Programme for non-managers preparing for promotion, and a Leadership and Management Development programme for Performance and Delivery Managers (PDMs, equivalent to existing Senior Probation Officers). As the contract progresses, we will work with Ingeus' Grade 2 Ofsted training arm to develop a suite of new qualifications targeted at improving probation-sector specific management skills in order to drive up both managerial and delivery standards in order to drive a reduction in reoffending.

Recruitment and Induction: All Caseworkers and Case Managers (and other frontline staff) will be expected to demonstrate the following competencies and attitudes: i) outstanding commitment to supporting offenders to progress and cease criminal behaviours; ii) superb communication skills and the ability to deliver challenging messages; iii) experience in a relevant role e.g. advisory work; and iv) the zeal to improve continuously, adapt to change seamlessly and contribute to innovation. All staff will receive a comprehensive two-week induction, which will cover areas including: the specifics of the contract, the RRP delivery model, techniques including motivational interviewing, systems including *PartnershipWorks*, quality standards and

performance expectations, including policies and change management.

Clear standards and expectations: Each member of staff and each subcontractor will be set clear standards (e.g. of behaviour, adherence to RRP policies etc.) and expectations (e.g. performance, service guarantees etc.) as part of their KPIs. Each will also be provided with clear lines of accountability, with defined members of staff holding them against their KPIs. Through our Caseload Management System *PartnershipWorks*, All appropriate staff members will be provided with Management Information at the touch of a button, allowing them to quantify and measure their performance and pro-actively address any issues. All KPIs will be made clear during the staff member's induction period, monitored frequently and managed in monthly meetings. All policies (e.g. safeguarding, health and safety) will be promoted through induction and constantly available on the CRC intranet site and updated on an annual basis, or more frequently if an urgent change is required.

A proven management framework: All Caseworkers (sited in prisons) and Case Managers (in the community) will report into Performance and Delivery Managers (PDMs), who will be responsible for managing each delivery region and ensuring that quality standards are upheld and site targets are met. PDMs and the Head of ETE will report into the Regional Manager who will report into the Operations Director. The Head of the Contact Service Centre; the Quality Assurance Lead; the Service Excellence Lead; and the Head of Community Payback will all report directly in to the Operations Director. This replicates the management staffing structure successfully used by Ingeus in the management of seven DWP Work Programme Prime Contracts. For full details please see **Diagram 2**.

Systems: RRP's bespoke Caseload Management System *PartnershipWorks* will be intelligent - configured to actively prevent bad or uncompliant practice. It will automatically flag when (for example) an offender does not turn up to an event. Over time, we will also build tools and helpers to support segmentation and allocation and risk assessments.

2) Monitoring activities (including external inspections and SFO findings)

RRP's QAF details a range of monitoring activities to enable us to identify and assess risks, and put in place necessary remedial solutions and service improvements. These will include:

Quality and Compliance Auditing: We will have a dedicated team of RRP Auditors in place to provide systematic checks of the quality of the provision and that we are delivering and contractual and legal compliance. The auditing regime will be driven by monthly remote checks (through *PartnershipWorks*) and quarterly regular on-site spot checks. This will include:

- The quality of Sentence Plans including Pre-Release Resettlement Plans, must meet and exceed that set out by MoJ in Schedule 7 OM 8. We will check that they are agreed with the offender, high quality, reasonable according to the offender's needs.
- The quality of assessments of rehabilitative needs (Schedule 7 RH1)
- Reviewing case histories and action logs on *PartnershipWorks* to ensure that actions detailed on the Sentence Plan and Resettlement Plan and highlighted through rehabilitative needs assessments have been undertaken and if not, whether this has been logged along with a sufficient explanation (Schedule 7 RH2)
- The quality of written reporting e.g. to courts/sentencers (pursuant to Schedule 7 OM1), breach referrals, recall referrals and risk escalation reporting (Schedule 9 Part 3: E-G)
- Timeliness with respect to stipulated MoJ timescales e.g. Schedule 7 OM2: one day limits for written submissions to courts/sentencers; and Schedule 7 OM4: the Pre-release Resettlement service must occur within the three months prior to an offender's release and the offender's first meeting with their Case Manager in the community must occur within one day of release. Adherence to timescales will also be promoted by the configuration of *PartnershipWorks* which will prevent actions being taken outside or booked outside of MoJ-compliant timescales, and highlight any actions coming up to their deadline on the Caseworker's/Case Manager's dashboard.
- Assuring that accredited programmes meet the standards of the accrediting body (Schedule 9 Part 3 D).
- Adherence to key policies including Safeguarding, Risk/Incident Reporting, Health and Safety, Equality and Diversity and Sustainability.

As part of RRP's risk-based approach, a Red, Amber or Green risk rating will be awarded (RAG rating) quarterly to each RRP Hub and any identified serious non-compliance or high risk quality issues will be flagged immediately for action. This will enable RRP Auditors to focus resource where it is needed and provide additional support and/or increased checks on sites which achieve a poor RAG rating. Findings will be communicated to PDMs and the Regional Manager, with trend analysis undertaken by RRP Data Analysts. The Auditing Team will disseminate weekly reports to the Operations Director and Regional Managers; monthly reports to all operational managers (and subcontractors); quarterly RAG risk-ratings for all delivery sites; quarterly Executive reports; and tri-annual Risk and Audit Committee reports.

Performance Excellence Framework (PEF): Owned and developed by RRP's Service Excellence Team (SET) the PEF is a self-assessment tool which empowers PDMs to achieve consistent delivery standards by

setting best practice benchmarks against which they can measure local performance. The PEF will detail comprehensive guidelines, responsibilities and monitoring regimes for observing, assessing and improving service quality. PDMs will conduct quarterly PEF audits with results used to inform the development and delivery of local Site Development Plans.

Direct Observation: On a day-to-day basis, observations of Assessments and interventions will be undertaken by PDMs, thus forming part of the manager's assessment of the Caseworker/Case Manager's performance. These observations will be increased in frequency if specific issues are identified. In addition, members of our Service Excellence Team will conduct period observations of randomly-sampled Caseworkers/Case Managers, as well as structured observation campaigns as part of thematic reviews (as part of service improvement activities). This will be supported by Peer Review, where staff (including from other sites, CPAs etc.) review each other's performance and suggest improvements.

Service User Feedback: We will pro-actively seek feedback from the offenders who use our services. Service User Councils, RRP Hub Forums and SET Focus Groups which together will: design the methodology for engaging with service users and oversee progress; provide a forum for service users to talk to senior RRP managers; and provide a conduit for customer insight as part of our continuous improvement activities. In line with Schedule 9 Part 3: A, we will conduct annual Offender Survey and quarterly Offender Satisfaction Questionnaires, with questions asked in line with Schedule 9 Appendix 1. Our multi-channel complaints and feedback process will facilitate the continuous capture of offender views to inform continuous service improvement and monitor quality.

Staff Feedback: We will seek to engage both prison and RRP staff into the quality monitoring process by seeking their views as to what isn't working in the programme, and what could be improved. This will primarily be achieved by regular staff forums, convened to scrutinise key themes, but also through the staff intranet (including prison intranets) which will have both an ad hoc suggestion function and annual surveys for all staff.

Inspections and SFO Investigations: We will welcome inspections and reviews by external bodies as an opportunity to receive further input about the quality of our service. This will include SFO Review Findings (including Domestic Homicide Reviews), NOMS/MoJ, Her Majesty's Inspectorate of Probation, the Government Procurement Service (contract management), and others. From a process perspective, findings from these bodies will be treated as a management priority, and will also provide a key contribution to our knowledge generation and service improvement process – along with the monitoring activities described.

3) Management of Identified Quality Issues

Any shortfall against our expected high quality standards detected through the above monitoring activities and analysis of MI (described below) will be a priority issue for RRP' managerial staff. They will be managed at the appropriate level in all cases:

Individual - RRP has a 'support first' ethos, and will offer proactive and collaborative support to all members of staff who fail to meet their KPIs or who have an identified quality issue. This will include: regular informal contact as well as monthly Performance Reviews with their line manager for early identification/redress of risks and discussion of performance against KPIs; provision of training and development activities; and a consultative approach to performance management (e.g. asking the Caseworker/Case Manager themselves to come up with solutions to resolve the issue). Each quarter every member of staff is awarded a RAG rating with respect to their quality and performance, as assessed by the line manager. Those achieving an Amber rating will create a Performance Improvement Plan in collaboration with their line manager, setting out key objectives and support strategies for the following quarter. Where employees fall into Red, our Capability and Support Policy will be triggered which could ultimately lead to dismissal.

Local – Each delivery site, whether in the prison or the community, will have a Site Development Plan, which will be the responsibility of the PDM to implement, scrutinised by the Assistant Director of Justice. All identified risks and quality deficiencies will be fed into the PDM by our Quality Assurance Team, and it will be the PDM's responsibility to identify appropriate, time-bound remedial action and add it to the Site Development Plan. Progress against this action will be reviewed by the OM, and RAG-rated. All outstanding Red Actions will be fed into the RRP Risk and Audit Committee.

National – We will have a Risk Assurance Plan in place, which will be a living document covering all our delivery. Responsibility for developing and maintaining the Plan will sit with the Director of Justice, and receive close scrutiny from the Risk and Audit Committee. Risks and quality deficiencies identified by the Quality Team that apply to the full contract will be reported into the Operations Director – immediately in the case of issues that require immediate redress, and on a monthly basis for all other issues. The Head of Justice will then be charged with identifying time-bound solutions, and the best mechanism for the roll-out of that solution. Progress against this action will be reviewed by the Risk and Audit Committee.

4) Knowledge generation and service improvement

Partnership Works is designed to capture information on all performance metrics likely to have a bearing on the success of reducing reoffending. Over time this will become a leading repository of offender data and

provide the platform to generate objective evidence of what works, when and for whom. *PartnershipWorks* will interface directly with our MI Gateway, facilitating both standard reporting and bespoke reporting inquiries at the touch of a button in order to facilitate performance management (against the clear standards and expectations outlined in Phase 1) and generate knowledge. It will record all key offender performance metrics including:

- The % of offenders who have had face-to-face appointments arranged within 5 days of initial allocation (Schedule 9 Part 2 1) and within one day of release (Schedule 9 Part 2: 2)
- % attendance of all scheduled appointments (Schedule 9 Part 2: 3)
- % of positive completions of: community orders and suspended sentence orders; licences and post sentence supervision periods; unpaid work requirements; programme requirements; rehabilitation activity requirements; Resettlement Plans; and Pre-Release Plans (Schedule 9 part 2: 8-14)
- % of successful recall applications (Schedule 9 part 2: 17)
- % of offenders with settled accommodation on release (Schedule 9 part 3: C) and % entering employment
- % of offenders re-offending on release i.e. re-offending rate

All Caseworkers/Case Managers will be able to analyse their own performance through a performance dashboard on *PartnershipWorks*, as will managers at a broader level. In addition, our MI Gateway will generate a wealth of data for RRP Data Analysts to foster knowledge and analyse the quality of our service and the performance it generates e.g. with offenders with protected characteristics. This will allow RRP to identify trends, address thematic issues and provide the MoJ with a comprehensive performance picture of what works, when and for whom. Standard reports will be communicated to PDMs and other managers on a weekly basis, with monthly reports to all senior managers and subcontractors. Bespoke reporting will also underpin vital functions such as continuous improvement.

The collection and analysis of data, robust feedback processes (including focus groups), and operational insight will enable the piloting and creation of new approaches, including interventions and services, to respond to identified needs. This will be overseen by the RRP Service Excellence Team (SET) who will be responsible for delivering our **Service Improvement and Innovation Process** outlined in **Diagram 3**. Based on DMAIC service improvement methodology, RRP's Service Improvement and Innovation Process allows local responsiveness to identified performance trends, new priorities and changing demographics. Adopting the **Define-Measure-Analyse-Improve-Control** process allows RRP to draw on process improvement best practice and enables us to pilot new interventions and refine existing provision to achieve maximum value for service users.

This innovation process embeds local responsiveness: new Service Improvement and Innovation projects can be triggered by operational leads, as a result of PEF audits or central data and feedback analysis, or through the SET who will identify high-impact projects. Service improvements could include the development of new assessment tools, improved interventions or piloting new communication channels for particular groups in response to performance deficiencies in particular groups. Service innovations could include new targeted interventions in respect of identified needs, such as gang crime or learning disabilities.

The SET will promote the adoption of all service improvements and innovations, and will make certain that delivery staff have the right skills to execute services as designed. Dedicated RRP Trainers will ensure this through comprehensive inductions for new starters, and one-to-one/group sessions to embed new processes or provide refreshers where issues are identified (including through the above monitoring processes). This process will ensure an effective and standardised approach to service improvement and innovation.

Wherever possible, we will seek to work with partners – including NPS, Local Authorities, Community Safety Partnerships, third sector organisations, and NHS services – in the design and implementation of service improvement or innovation. Our Partnerships Team will be responsible for developing co-commissioning and joint working approaches.

5) Sharing of evidence and new best practice with MoJ

We will be both compliant with MoJ stipulations and add real value by using our monitoring, management, knowledge generation activities to develop a new best practice for reducing reoffending which we will share with MoJ and other key stakeholders. Pursuant to Schedule 9 Part 1 3.1 and in accordance with Clause 39.1(d), we will communicate performance data deriving from this within the first ten days of each month to MoJ, including all management information listed in Schedule 20 – with the pertinent information automatically uploaded to nDelius. In line with Schedule 20, we will ensure the accuracy of all management information listed, including thorough sampling checks made through the auditing process as described above. As part of the implementation process, we will agree information sharing processes with MoJ, including potential integration with MoJ systems and information security protocols. If requested, we will welcome MoJ auditing of our compliance with Schedule 20, and our RRP Data Analysts will work collaboratively with MoJ to provide additional assurance on MI data where requested. We will also regularly convene meetings to share our best practice as well as issuing regular reports about key issues.

Diagram 1

QUALITY ASSURANCE FRAMEWORK

*Delivering excellence with integrity
Protecting the Public
Reducing Re-offending*

**LEADERSHIP AND
MANAGEMENT**

DELIVERY

**COMPLIANCE, QUALITY
ASSURANCE AND
CONTROL**

**INSPECTION,ASSURANCE
AND ACCREDITATION**

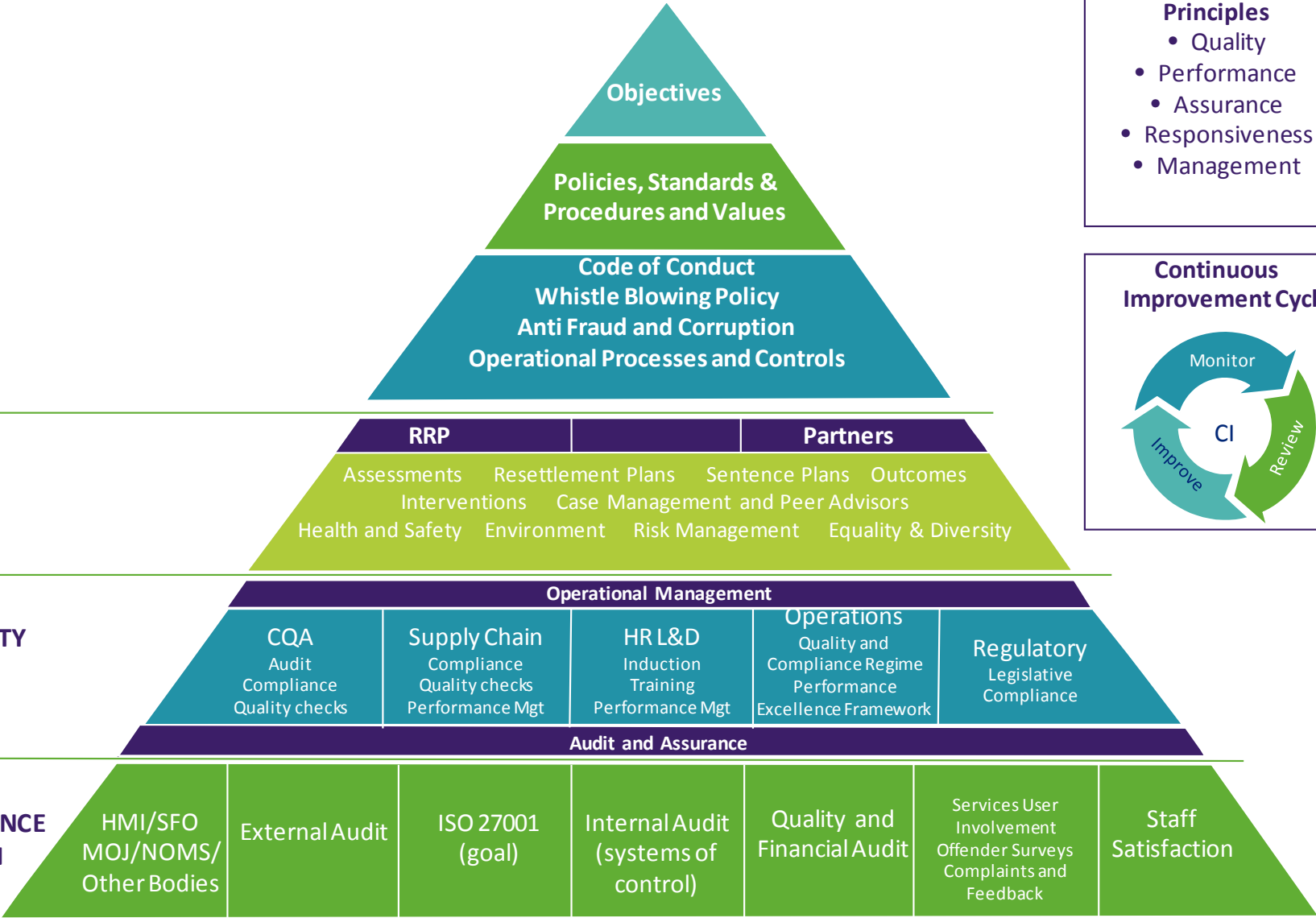


Diagram 2

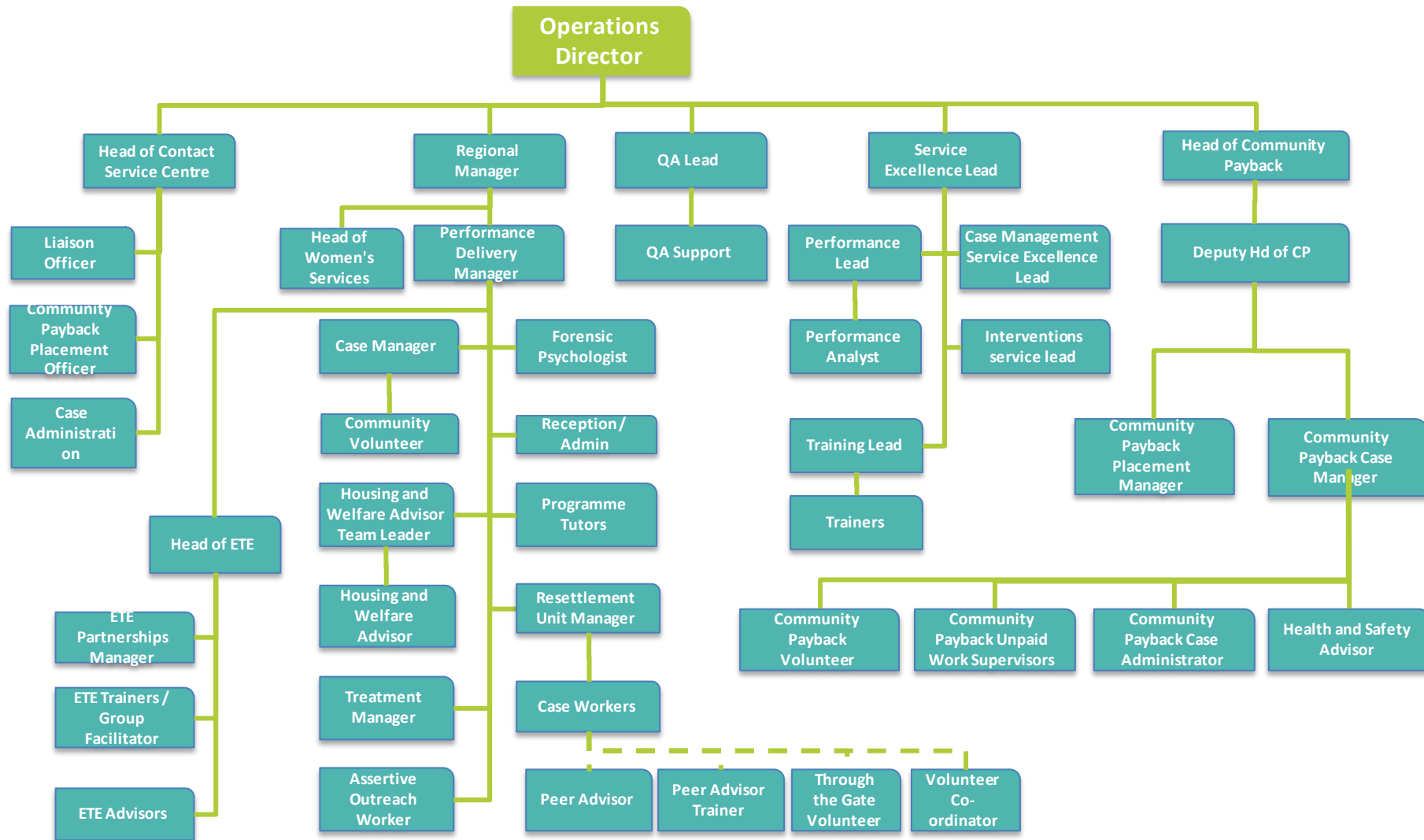


Diagram 3

Service Improvement & Innovation Process

