

Report No.
ED15133

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: EDUCATION POLICY DEVELOPMENT AND SCRUTINY COMMITTEE

Date: Tuesday 24 November 2015

Decision Type: Non-Urgent Non-Executive Non-Key

Title: UPDATE ON PROGRESS OF THE YOUTH OFFENDING SERVICE IMPROVEMENT PLAN

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Chief Officer: Director: Safeguarding & Social Care (ECHS)

Ward: Borough-wide

1. Reason for report

- 1.1 This report provides information to the Education PDS Committee on the progress of the Youth Offending Service (YOS) Improvement Plan.
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2. **RECOMMENDATION(S)**

- 2.1 **Members of the Education PDS Committee are invited to comment on the contents of this report and the progress of the YOS Improvement Plan.**

Corporate Policy

1. Policy Status: Existing Policy:
 2. BBB Priority: Children and Young People Excellent Council Safer Bromley Supporting Independence:
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Financial

1. Cost of proposal: Not Applicable:
 2. Ongoing costs: Not Applicable:
 3. Budget head/performance centre: Bromley Youth Support Programme
 4. Total current budget for this head: £960,560
 5. Source of funding: Youth Justice Board and Mainstream Funding
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Staff

1. Number of staff (current and additional): 22.3
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: Statutory Requirement Crime and Disorder Act 1998, Legal Aid, Sentencing and Punishment of Offenders Act 2012
 2. Call-in: Not Applicable:
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Customer Impact

1. Estimated number of users/beneficiaries (current and projected): All service users
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Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments: N/A

3. COMMENTARY

3.1 The Bromley Youth Offending Service (YOS) was subject to a Full Joint Inspection by HM Inspectorate of Probation (HMIP) in February 2015. The outcome of the inspection was disappointing with four out of five of six key judgements considered to be poor, 1 unsatisfactory and 1 satisfactory.

3.1.1 In response to the Inspection, the YOS, with the help of the Youth Justice Board (YJB), have developed an Improvement Plan (**Appendix 1**). The draft plan was presented to a Joint Education, Care Services and Public Protection and Safety PDS committee meeting on 22nd July 2015. The Portfolio Holder for Education and Chair of the Education PDS asked for regular reports on the progress of the YOS Improvement Plan to be presented to Education PDS. The Improvement Plan has been updated and subsequently agreed by the YOS Management Board and the HMIP Lead Inspector.

3.1.2 The Improvement Plan is RAG rated for ease of reference. Green shows the action is completed, amber means it is in progress, red shows an action has slipped and white indicates the work is not planned to start.

3.1.3 The first progress report was presented to this meeting on 29 September 2015. This is the second update.

3.1.4 Work has commenced on all planned actions with the exception of 4(g), 3(h), 6(d) and 6(e), where it is anticipated that this will commence in November.

3.2 Leadership and Partnership

3.2.1 The service continues to complete the weekly data cleaning exercise in order to improve the quality of information being recorded by the team. This will support the development and accuracy of the YOS Performance Report which is currently being reviewed and will be updated for the November Management Board.

3.2.2 The Interim Head of the YOS has undertaken a restructure of the team in order to maximise the support and scrutiny staff members can expect from their line managers and to minimise the number of cases any one member of staff holds. This has reduced the number of staff each member of the YOS Management Team directly line manages (**Appendix 2**).

3.2.3 The service has recruited an experienced locum senior practitioner in order to provide operational support to the team until the permanent post is filled.

3.2.4 The team continues to reduce the number of locums it employs in order to facilitate efficiency savings. There are vacancies in three posts - an operational manager, senior practitioner and a qualified practitioner.

3.2.5 The service has developed a draft Continuous Professional Development Plan in partnership with workforce development. This plan will ensure that members of staff have a clear development pathway and are fully supported in their role. This is consistent with the development framework which has been adopted within other teams in the Children's Social Care Directorate.

3.3 Quality, Assessment and Planning

3.3.1 The service completed the statutory National Standards Audit (Reducing First Time Entrants and Work with Victims of Crime) where a total of 29 cases were audited. The audit judged the quality of pre court work in three categories. i) **Preventing offending** - 100% of cases met the

standard with improvements, ii) **Out-of-court disposals** - where 40% of cases met the standard with improvement, 54% cases met the standard and 6% where the standard was not met and iii) **Work with victims of crime** - 80% of cases met the standard. Following the completion of this task the team developed an action plan to address the issues that had been identified by the audit (**Appendix 3**). The majority of these actions have been completed. The YOS Management team will continue to audit Pre-court cases to monitor the quality of work being undertaken with young people.

3.3.2 The service is currently participating in the voluntary national reoffending 'deep dive' audit being co-ordinated by the Youth Justice Board. The audit will be investigating prolific offenders which will be carried out on 4 cases (2 where there has been a successful outcome and 2 where there has not). The timetable for completion of this is the end of November 2015.

3.3.3 The team commenced its audit programme in September 2015 for court and community work. However, due to annual leave commitments and the obligation to complete National Standards Audit the cohort size was small and it was decided to carry out a full benchmarking exercise in October.

3.3.4 The team audited 15 court and community cases in October to quality assure i) Asset/ROSH, ii) Interventions Plans, iii) Risk Management Plans and iv) Vulnerability Management Plans. Cases were dip sampled from two cohorts, young people at the start of their order and young people who had reached the review stage of their order (3 months). The analysis from this exercise is summarised below:

Asset/ROSH – 66% of cases were judged to be inadequate

Intervention Plan – 80% of cases were judged to be inadequate

Risk Management Plan – 60% of cases were judged to be inadequate

Vulnerability Management Plan- 45% of cases were judged to be good and 45% of cases were judged to be inadequate.

The audit programme will continue on a monthly basis and has been expanded to include pre court work. A report will be available in December. YOS managers will feedback to case holders where work has been found to be below standard and the cases will be monitored to ensure improvements take place.

3.3.5 Members of staff continue to attend training sessions to develop the skills and experience necessary to deliver the quality of work required. This has included a two day training session on Critical and Analytical Thinking Skills and a three day training session which covered modules on ASSET and Intervention Planning, Assessing and Managing Risk and Vulnerability and Report Writing. Staff have also attended drop in sessions delivered by the Restorative Justice workers and the CAMHS specialist.

3.3.6 The Health Screening Procedure was re launched in October 2015 to provide clear guidance about how to access specialist advice and assistance. The YOS Management Team are currently reviewing the level and range of support provided by specialist workers who are seconded to the YOS to ensure that young people's needs are being met.

3.3.7 The service is currently reviewing a number of internal processes including the work and effectiveness of existing panels and the remit and number of meetings that YOS Management attend.

3.3.8 One member of staff has been enrolled on the YJB accredited Effective Practice Certificate. This course is designed to consider what it means to work effectively with young people at risk

of (re-)offending and is highly practice-focused. The service would envisage that additional members of staff will complete this course next year.

3.3.9 Three members of the YOS Management Team will be attending the next YJB Annual Convention on 25 and 26 November 2015 which will cover the Journey of the Child covering four main themes – 1) Children and young people before entering the youth justice system, 2) Children and young people in the youth justice system, 3) Custody and rehabilitation and 4) Resettlement or Transition to Adult Estate.

3.4 Children Looked After

3.4.1 The service has recruited a case worker to fulfil the function for a ROLAC (Responsible Officer Looked After Children). The remit of this officer is to ensure that offending and reoffending is reduced amongst the looked after children population of Bromley.

3.4.2 The service monitors the number of CLA on the YOS caseload by offence type and outcomes in the updated monthly Management data. The ROLAC officer will work in partnership with the CLA team in Bromley to ensure there is no further offending.

3.2.3 The Head of the Youth Offending Service is a contributing member of the Corporate Parenting Strategy Group and will be discussing the issue of CLA reoffending at the next meeting.

3.5 The Voice of the Young Person and other service users

3.5.1 Case Managers request all young people complete a Service User Feedback form. The analysis from the first report should be available by mid-November. Recommendations and feedback received will be fully considered by the YOS Management Team.

3.5.2 The service continues to collate feedback from young people using the HMIP survey. The deadline date to finish this task is 14 February 2016.

3.5.3 Following the completion of the National Standards Audit the service identified that parents/carers needed to be more involved in the implementation of plans and interventions and is currently investigating ways to address this.

4. FINANCIAL IMPLICATIONS

4.1 Whilst there are no specific resource implications arising from this report, the inspection raises a number of areas which could involve changed investment or use of resources. Any specific resource implication arising from the Improvement Plan will be presented to the Portfolio Holder as appropriate.

5. LEGAL IMPLICATIONS

5.1 HMIP have a statutory duty to inspect YOS and it is also required to make its report available to the public.

6. PERSONNEL IMPLICATIONS

6.1 Any personal implications arising from the improvement plan to address the issues raised by the inspection will be presented to the Portfolio Holder as appropriate.

Non-Applicable Sections:	Policy Implications
Background Documents: (Access via Contact Officer)	[Title of document and date]