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| A picture containing logo  Description automatically generated | **Working together to keep young people and their communities safe** |
| Torbay Council ● Devon and Cornwall Police ● NHS Devon ● Probation Service | |
| QUALITY ASSURANCE POLICY & FRAMEWORK | |
| July 2024 | |

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| Date | Details | Updated by |
| 1/8/24 | Policy Review | Jon Ralph |
| 21/10/22 | QUALITY ASSURANCE POLICY & FRAMEWORK | JON RALPH |

1. **Introduction**

Torbay Youth Justice Service (TYJS) has a duty to provide the best and most effective service to children, the local community, and the local and national partnership in line with the service vision.

**Our Vision**

*‘Keep young people and their communities safe by working in collaboration with other services to help children recognise and repair the impact of harmful behaviour and develop a positive future’*

1. **Child First**

Torbay Youth Justice Service (TYJS) supports the Youth Justice Board’s (YJB) vision of a ‘Child First’ youth justice system, which they define as a system where all services: -

* Prioritise the best interests of children and recognising their needs, capacities, rights, and potential. All work is child-focused, developmentally informed, acknowledges structural barriers and meets responsibilities towards children.
* Promote children’s individual strengths and capacities to develop their pro-social identity for sustainable desistance, leading to safer communities and fewer victims. All work is constructive and future-focused, built on supportive relationships that empower children to fulfil their potential and make positive contributions to society.
* Encourage children’s active participation, engagement, and wider social inclusion. All work is a meaningful collaboration with children and their carers.
* Promote a childhood removed from the justice system, using pre-emptive prevention, diversion, and minimal intervention. All work minimises criminogenic stigma from contact with the system.

The following measures will be implemented across the service with the intention of improving the quality and effectiveness of the service through the recognition of good practice, addressing areas for improvement, and promoting learning for strategic leaders, operational managers, the staff team and volunteers.

1. **Professional development**

The service will have an annual appraisal process that should recognise and celebrate good practice and professional development and set targets for the year(s) ahead for the ongoing development and future career plans of staff and volunteers. Targets should be SMART: -

* Specific
* Measurable
* Achievable
* Realistic
* Time bound

The appraisal process will also set a development plan to enable you to achieve the work targets. Development opportunities may include:

* formal training courses
* use of online resources such as the Youth Justice Interactive Learning Space
* becoming a ‘Champion’ for areas the service may want to develop ie Trauma or Restorative Justice
* ‘buddying’ or mentoring by other members of the team
* guidance and feedback from managers
* quality assurance processes
* shadowing
* other forms of feedback

It is vital that all staff take responsibility for their own development and should:

* identify areas in which they would like to improve
* be ready to accept feedback, and implement the development identified by this
* use all opportunities, both formal and informal, to learn

1. **Getting feedback**

There are a range of ways you can receive feedback on your performance, and you should take enough time, to assess the feedback and decide on actions for improvement. Feedback measures include:

Regular one-to-one supervision sessions minimally once every 6 weeks will examine progress against targets, as well as review casework, overall workload and offer support to the individual.

1. **Management feedback**

Management feedback includes:

* gatekeeping of reports
* quality assurance of AssetPlus documentation
* direct observations of practice
* Discussions and actions given by panels
* Discussions and actions given by panels include:
* risk of custody meetings
* internal risk management or Multi Agency Public Protection meetings
* case discussion reviews
* Feedback from children, parents / carers, victims, other professionals and could include:
  + service user panels
  + feedback through mentoring or advocacy services
  + complaints and compliments processes
  + Feedback from other stakeholders

Feedback from other stakeholders could include:

* + judge or magistrates’ views on court reports
  + Referral Panel volunteers’ views
  + input from victims
  + feedback from the Youth Custody Service or secure estate

If staff would like management oversight of a particular assessment, intervention or other piece of work, they are able to ask for it even if it falls outside of our locally agreed oversight thresholds. It is important that staff complete actions allocated to them on a case by a manager, panel or other process and that they are within the requested timescale.

1. **Contributing to service development**

All staff, managers, volunteers, children, parents, victims whatever their level or degree of experience are able to contribute to improving the TYJS. They can:

* take part in peer reviews of reports, cases, interventions or assessments
* give constructive feedback to managers or colleagues on their performance
* take part in working groups to develop specific areas of practice, or ‘champion’ particular initiatives
* Share latest research / findings from Case reviews at team meetings
* act as a ‘buddy’ or mentor to colleagues on advanced areas of practice
* identify development opportunities needed for colleagues and suggest ways these could be met
* report back to colleagues after attending a training course

1. **Reflective practice**

It is important that staff take time, with their managers or colleagues to consider their work and ways that practice, or outcomes could have been different. To be most effective they should have:

* enough time
* a constructive focus
* the consent of all parties
* no intent to allocate blame

Staff can share what they learn from reflective practice with colleagues more widely, and use it to inform the direction of service development. The aim is for you to develop an ‘internal supervisor’, so that you can:

* give your work a critical appraisal
* increase confidence
* make your practice more effective

1. **Guidance for managers**

The most effective youth justice services act as continuous learning environments where staff at all levels are responsible for their own development and that of the service as a whole. Where staff take responsible risks to advance their practice and view mistakes and setbacks as opportunities to learn rather than blame. They actively seek the involvement of service users, stakeholders and the wider community to improve practice, and welcome complaints, reviews and inspections as opportunities to learn.

1. **Developing specialist youth justice skills**

Youth justice is a highly specialised area of work, and it is important that staff receive adequate training and support to develop the skills they need. The [Youth Justice Board Learning and Skills Matrix](https://yjresourcehub.uk/workforce-development/item/619-youth-justice-skills-matrix.html) outlines the knowledge, skills and activities needed at different levels within the justice system, this be can used to assess the learning and development needs of individual staff, and form a plan for the service as a whole. The skills audit works alongside the Matrix and enables the youth justice workforce to improve practice.

Staff who provide a professional service to the courts will be provided with specific training and shadowing opportunities to be able to fulfil the role effectively. Staff who prepare reports for courts and panels will be provided with development support to understand how they need to present them. Individuals new to report writing are likely to need a lot of practice and feedback to learn this task, and models such as ‘buddying’ with a more experienced practitioner and undertaking joint interviews and writing parallel reports enable thorough and effective learning.

Staff will be supported to complete the Youth Justice Effective Practice Certificate and the Degree in Youth Justice if required by their post.

1. **Management Oversight**

Managers will regularly carry different levels of oversight based on the assessment of risk as well using local and national audits and inspections to evaluate local performance against best practice these will include: -

* the assessment of overall quality of case management
* feedback and actions identified from audits and inspections
* quality improvement processes set in the Youth Justice Plan and National Standards audits
* Use the thematic inspection self-assessment toolkit for more information on how to self-assess against all relevant HMI Probation thematic inspection report recommendations.
* Carry out thematic audits within the service

It is not usually necessary for managers to check every document and intervention provided for quality. Torbay YJS have decided on the following criteria for cases that must have management oversight: -

* All High-Risk cases should be assessed using AssetPlus
* All multi agency public protection status (MAPPA) cases
* All Intensive Level Intervention cases

Managers will undertake a range of day-to-day activities to ensure that work with children is of a sufficient quality. These include:

* Gatekeep all reports for court, Referral Panels and other formal settings.
* Discuss all cases in supervision meetings to give feedback on quality of assessments, interventions planned and delivered, and guidance on next steps and record this oversight on ChildView.
* Observe a practitioner at work in one-to-one sessions with children, delivering offending behaviour interventions or acting as court officer in order to give informed feedback on their practice.
* Dip sample cases, either directly or using colleagues, peers, sector partners or independently commissioned consultants
* Countersign relevant sections of AssetPlus.
* Advise and guide staff through discussions at panels such as risk of custody, high risk, case reviews and Compliance Panels

Managers have a responsibility to give staff opportunities to develop the knowledge and skills they need to do their work effectively. Managers also need to provide practical and emotional support for staff who can be handling high and challenging caseloads.

It is vital that managers feel confident in their ability to give honest, constructive feedback to practitioners, including when this may be received with negativity or hostility. Managers may find that the following help develop these skills:

* supervision training
* management meeting discussions
* peer support

Managers should clearly record:

* management oversight (eg Audits or dip samples etc) on ChildView.
* supervision notes, which should also be shared with the supervisee and kept as a record of discussions.
* actions on individual cases, in the appropriate management oversight category on the information management system.
* If you are a line manager, you are responsible for agreeing actions on cases to the practitioner as well as ensuring that these are completed within the set timescales.

Managers should ensure that discussions are not focussed on processes and systems to the extent that qualitative issues are not given sufficient attention. There should be a shared understanding of what ‘reflective practice’ means to TYJS, and staff should have the opportunity to consider the impact of their own feelings, assumptions and attitudes, and the connections with their actions, without criticism for doing so. Supervising managers need to create a relationship of trust, honesty and respect, and understand emotions.

1. **In-depth quality assurance initiatives**

Alongside day-to-day activities, managers will undertake in-depth audits of case work to assess and improve quality. These will include:

* Full audits of at least two selected cases on a quarterly basis across the service
* A full audit of a selected case would assess all aspects of case management from allocation and reports through assessment and planning to delivery of interventions and exit planning.
* Thematic audits as required eg Education, Custody, Victims, Transition and resettlement, SEND etc

This can lead to development plans for practitioners or areas of practice. TYJS may use the following resources to do this: -

* [YJB quality assurance tools](https://yjresourcehub.uk/)
* [Her Majesty’s Inspectorate of Probation’s InfoPath tool](https://www.justiceinspectorates.gov.uk/hmiprobation/wp-content/uploads/sites/5/2018/07/Probation-Guidance-Manual-External-v1.6_260618.pdf).
* external agencies which undertake auditing exercises or other locally devised measures
* [The Youth Justice Sector Improvement Partnership (YJSIP)](https://aym.org.uk/yjsip/)

The Youth Justice Sector Improvement Partnership (YJSIP) is between the Association of YJS Managers (AYM), the Youth Justice Sector and the Youth Justice Board (YJB). The YJSIP sector improvement offer includes Peer Review, bespoke Peer Challenge and coaching/mentoring. YJSIP is a universal offer across England and Wales.

Applications are considered for approval on a quarterly basis at the YJSIP Programme Board. In addition to the sector ‘offer’, YJSIP runs a number of training events and an Operational Managers Programme.

1. **Thematic audits or Deep Dives**

Thematic audits will be used on specific areas such as intervention planning, or types of offence such as those of violence, to assess how well TYJS doing on this theme. The YJB toolkits will be used, including those which tackle disproportionality.

1. **Performance and data analysis**

TYJS will undertake exercises in overarching statistical analysis to inform our planning and service development. These will include analysing the cohort of children who reoffend to examine the age, sex, ethnicity and other factors which increase risk, and tailor services accordingly using the reoffending live tracker within the Youth Justice Application Framework document library. It may include analysis of congruence rates – the extent to which the court accepts recommendations made in pre-sentence reports to develop the relationship with sentencers. It may also include analysis of the diversity of service users to examine whether any groups are overrepresented compared to their prevalence in the local population, and to devise services sensitive to their needs. These reports will used by operational managers and reported to TYJS Strategic Board to influence future planning.

1. **Service user involvement**

The Service will have a consistent and thorough means in place for consulting children, parents / carers and victims and others who use the service on a range of aspects. These may include:

* their opinion of the skills and knowledge of the staff who provide them with support.
* the sensitivity of the services provided to their particular needs.
* the effectiveness of the work they undertook in supporting them, developing positives, reducing the likelihood of re-offending and ensuring their safety.
* the extent to which they made progress with the YJS and the extent to which this will be sustained at the end of that involvement.

This feedback then needs to be collated and used to inform the development of individual members of staff, work streams and the service as a whole through reporting the TYJS Management Boards

TYJS will seek to fully engage service users in our development and will explore: -

* involving children, parents and victims in staff recruitment processes.
* engage children, parents and victims in the processes of selecting and appraising offending behaviour programmes.
* utilise panels of children for initiatives such as assessing applications for grant funding
* involve children, parents and victims in training opportunities for staff in TYJS or partner agencies such as the police.
* ask children, parents and victims to engage in working groups on specific topics, such as supporting the police in managing stop and search initiatives.
* include service user voice or representatives on the TYJS Strategic Board, or implement a Youth Board.

If children, parents and victims provide feedback and get involved, we will take every opportunity to make sure that it is recognised as important and not tokenistic, and that their views are thoroughly reflected in plans for change, and that if possible providers of feedback are informed of key themes and plans for change.

1. **Stakeholder feedback**

We will seek feedback from a range of other partners involved in the delivery and receipt of youth justice services. These will include:

**victims** – asking for feedback on their experience of contact with the TYJS, involvement in restorative activities, and satisfaction with the overall process.

**the local community** – is there satisfaction with the TYJS locally, are there opportunities to get involved, is reparation activity effective in making restitution for youth criminality.

**partner agencies** – Service Level Agreements should be in place and set out how you will consult with and involve key partners including, at minimum, the police, health services, Children’s Services, Probation and the local housing authority.

**the courts** – there should be opportunities for court officials to give feedback on reports and other services provided.

**YJB regional link** will have access to a range of data which can inform performance planning. Other services such as the Youth Custody Service can give useful feedback, for example on the consistency and quality of documents provided when children enter youth detention accommodation.

**panels** such as the Multi Agency Public Protection panel, Integrated Offender Management, and other meetings with partners can provide useful feedback.

# PART A: Case Management

1. **Qualitative audit of Pre-Sentence Reports**

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| **Purpose** | **Method** | **Lead** | **Frequency** | **How do we know this is being done?** |
| Ensure that PSR’s are quality assured before going to court. Maintaining confidence of the court and achieving a high congruence rate with sentencing decisions. | All PSR’s gate kept by a panel consisting of report writer plus two other experienced report writers using QA check list. | Manager,  Report writer | Friday before Court Hearing | PSR gate keeping form completed returned to administrator. |
| All Option PSR’s QA panel must also include a manager. | Duty Manager | As above | As above. |
| PSR congruence rate monitored on a quarterly basis. | Information Officer | Quarterly | Information will feed into quarterly feedback report. |
| Magistrate’s feedback forms issued for every PSR (paper or online link) | Court duty officer | Same day as court | Completed feedback forms to be returned to administrator. |
| Magistrate’s feedback forms evaluated and fed back to the team. | Manager with responsibility for Courts | Quarterly (or earlier if urgent action required) | Information will feed into quarterly feedback report. |

1. **Qualitative Audit of Referral Order Reports**

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| **Purpose** | **Method** | **Lead** | **Frequency** | **How do we know this is being done?** |
| Ensure that fit for purpose reports are provided to Panels to ensure the Referral Order outcomes are achieved. | All Referral Order reports to be quality assured by a manager. | Report Writer | Minimum of 3 working days before the initial panel | No reports will be given to panel until QA process complete. |
| Panel feedback forms issued to panel members. | Panel facilitator | At panel | Completed feedback forms to be returned to administrator. |
| ASSETPlus quality assured where vulnerability & / or risk of serious harm is High or Very High | Team Managers | As required | ChildView controlled |
| Panel feedback evaluated and fed back to management team and team meeting | Manager with responsibility for admin | Quarterly (or earlier if urgent action required) | Information will feed into quarterly feedback report. |

1. **Qualitative Audit of ASSETPlus**

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| **Purpose** | **Method** | **Lead** | **Frequency** | **How do we know this is being done?** |
| Ensure the quality of assessments. | ASSETPlus used to inform Case Planning Forum. CPF chair to feedback any areas for action. | Report Writer | Within 1 working day of ASSET being completed. | Associated Management Plans signed off with checks being undertaken through monthly QA data check. |
| CPF actions to be followed up at next CPF. | Chair of CPF | CPF every week | Record being made on CV by chair of CPF of discussion and any actions (including entry in Key Process window). |
| AssetPlus quality assurance monitoring tool to be used on a monthly basis to inform practice and appraisal, during the initial role out of AssetPlus | Management team | Monthly – 2 cases per Case Manager | Record being made on CV by chair of CPF of discussion. |
| Themes from Asset quality assurance monitoring to be collated anonymously on a team basis to identify themes | Management team | Within one month of annual case audits being completed | Record made in Management Meeting Minutes and information feeding into training needs analysis. |

**4. Qualitative Audit of Case Management**

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| **Purpose** | **Method** | **Lead** | **Frequency** | **How do we know this is being done?** |
| QA of Assessment, Planning, Intervention and Supervision National Standard Compliance, Enforcement and Engagement. | Monthly case supervision to discuss all cases. Discussion and actions to be recorded on ChildView | Practice Manager | Monthly | Record made on ASSETPlus & copies of supervision notes held in case manager’s supervision file (signed by both manager and practitioner). |
| Case audit to be completed upon case closure, to include case closure template completed by practitioner | Practice Manager | Within two weeks of work on a case coming to an end. | Record made in CV case audit and any actions identified with completion dates. |

**5. Qualitative audit of intervention planning for high-risk cases using the Case Planning Forum (CPF)**

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| **Purpose** | **Method** | **Lead** | **Frequency** | **How do we know this is being done?** |
| Ensure High Likelihood of Re offending, High Vulnerability and High Risk of Harm cases are provided with a coordinated multi-agency intervention plan that reduces risk. | Case Planning Forums | Chair of Case Planning Forum | Fortnightly | Record of discussion and any actions being made on CV by chair of CPF (including entry in Key Process window) with actions being followed up at next CPF. |

**6. Qualitative audit of safeguarding & vulnerability management**

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| **Purpose** | **Method** | **Lead** | **Frequency** | **How do we know this is being done?** |
| Ensure quality of decision making, application of CP procedures and effective risk management. | All E&C and P&P sections to be countersigned by a manager. | AssetPlus author | Within 24 hours of the being completed | Additional external Management Plans signed off with checks being undertaken through monthly QA data check. |
| All MASH referrals to be discussed with a manager prior to referral. | Referrer | Prior to referral (same day) | Record of discussion to be entered on CV |
| Manager to be informed of all MASH referrals. | Referrer | Same day, when time permits this should be prior to referral, alternatively within 2 hours of referral. | Record of discussion to be entered on CV |

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| **Purpose** | **Method** | **Lead** | **Frequency** | **How do we know this is being done?** |
| Ensure quality of decision making with regard to managing risk of serious harm to others. | All Asset Plus E&C & P&P assessments countersigned by a manager. | Assessment author | Within 24 hours of the assessment. | Additional risk Management Plans  signed off with checks being undertaken through monthly QA data check. |
| High/Very High-Risk Cases taken to Case Planning Forum. | Assessment author/Chair of Case Planning Forum | Within 10 working days of assessment. | Record being made on CV by chair of CPF of discussion and any actions (including entry in Key Process window) with actions being followed up at next CPF. |
| Cases reviewed in accordance with policy and procedures. | Assessment author/Practice Manager | As per Risk of Serious Harm Policy. | Associated Plans signed off with checks being undertaken through monthly QA data check. |
| MAPPA forms countersigned by Manager. | Practice Manager | Same day MAPPA referral completed. | Copy of MAPPA form held on file. |

**7. Qualitative Audit of Risk of Serious Harm**

***8. Qualitative Direct observation of Practice***

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| **Purpose** | **Method** | **Lead** | **Frequency** | **How do we know this is being done?** |
| QA of direct work with young people. | Practice Manager to observe practitioners working directly with young people in a suitable setting and provide reflective feedback on the observation. | Practice Manager | 6 monthly | Copy of observation held in case manager’s supervision file signed by both manager and practitioner). |

9. **Qualitative direct observation of staff supervision**

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| **Purpose** | **Method** | **Lead** | **Frequency** | **How do we know this is being done?** |
| Quality Assurance of staff supervision | Practice Managers to be observed giving formal supervision. | YJS Manager | Annually | Copy of observation held in Practice Manager’s supervision file (signed by both Head of Service and Practice Manager). |
|  | Reflective feedback provided on the observation. |  |  |  |

**10. YJS Management full qualitative case audit**

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| **Purpose** | **Method** | **Lead** | **Frequency** | **How do we know this is being done?** |
| QA of entire case management (covering all the above areas). | YJS manager undertake full case audits using standard case audit template. Evidenced on CV as a ‘Random Case Audit’. | YJS manager/Head of Service | 2 cases on a quarterly basis (2 working days’ notice to enable collation of case material) | CV entry to be made to record that case has been audited with any specific issues identified & feedback given to the practitioner & their manager. Any wider themes to be addressed through management meeting. |

**11. Senior Manager Qualitative Inspection / Peer Audit**

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| **Purpose** | **Method** | **Lead** | **Frequency** | **How do we know this is being done?** |
| External QA of YJS Case Management. | Board Members to undertake annual random case audit using standard audit tool (4 cases across the team). | Chair of YJS Management board | Annually 5 working days’ notice of required cases. | CV entry to be made  to record that case has been audited with any specific issues identified and feedback given to the practitioner and their manager. Any wider themes to be addressed through management meeting. |
| Themed peer review to be arrange with neighbouring YJSs. | YJS Manager/Head of Service | Bi-annual reviews to be arranged | Formal report to be presented to Management Board. |

**PART B: Workforce**

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| **Purpose** | **Method** | **Lead** | **Frequency** | **How do we know this is being done?** |
| Ensure that YJS staff receive adequate professional support in line with organisational policy. | Review supervision calendar. | Management Team | Six monthly | Record made in Management Meeting Minutes of review of records. |
| Ensure volunteers receive supervision in line with requirements. | Review supervision records for volunteers. | Practice Manager with responsibility for volunteers. | Six monthly | Volunteer supervision records to be signed off by Practice Manager. |
| Ensure that sickness is monitored in line with organisational policy. | Review sickness records. | Management Team | Six monthly | Record made in Management Meeting Minutes of review of records. |
| Invoke sickness policy in line with organisational requirements. | Manager with responsibility for individual member of staff. | As required | Record held in staff member’s supervision file. |

**12. Provision of supervision**

**13. Workflow**

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| **Purpose** | **Method** | **Lead** | **Frequency** | **How do we know this is being done?** |
| Monitor workflow through the YJS and ensure that skill base reflects identified need. | Data queries through CV to establish trends in offences and resultant orders | Information Officer | Quarterly | Report being passed to Management Team / Board and fed back to team. |
| Reports to be shared with Management Team and information fed back to team. | Management Team | Within one month of data being available | Record made in Management Meeting Minutes and Team Meeting Minutes along with associated actions where necessary. |
| Identified training needs to be fed into training needs analysis. | Management Team | Upon identification of needs | Record made in Management Meeting Minutes along with associated actions where necessary. |
| Monitor profile of service users and ensure trends reflected in service provision. | Data queries through cv to establish trends. | Information Officer | Quarterly | Report being passed to Management Team / Management Board to inform planning and fed back to team. |

**14. Staff Development**

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| **Purpose** | **Method** | **Lead** | **Frequency** | **How do we know this is being done?** |
| Ensure that YJS staff and volunteers receive annual appraisals and information used to inform team development. | Staff appraisals to be completed. | Management Team | Annually | Staff supervision files will contain copy of appraisal signed by staff member and manager. |
|  | Volunteer appraisals to be completed. | Practice Manager with responsibility for volunteers. | Annually | Volunteer supervision files will contain copy of appraisal signed by volunteer, supervisor, and Practice Manager. |
|  | Themes to be collated and explored. | Management Team | Annually (within three months of appraisals being completed) | Record on Management Meeting Minutes and information fed into Training Needs Analysis. |

**15. Focus on Service users**

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| **Purpose** | **Method** | **Lead** | **Frequency** | **How do we know this is being done?** |
| Ensure that service users remain central to the service provided. | Feedback to be sought from all young people at the end of their involvement with YJS. | Business Support with responsibility for collating feedback | As required (in the last 2 weeks prior to the work with the young person finishing). | Feedback to be recorded by business support for collating to report to the team management team and management board |
| Audit of numbers of plans which involve the young person & parents & have their sign off. | Manager with responsibility for admin | Six monthly | Information will feed into quarterly feedback report. Specific issues to be addressed through supervision. |
| Feedback to be sought from young people following attendance at Referral Order Panels. | Admin worker with responsibility for collating feedback | As required (within one week of panel taking place) | Feedback to be recorded by administrator for collating. |
| Feedback to be sought from parents following completion of parenting intervention. | Parenting Worker | As required (within one week of completion of intervention) | Feedback to be recorded by administrator for collating. |
| Feedback to be sought from local communities upon completion of indirect reparation in their area. | Reparation Worker | As required (within one week of completion of intervention) | Feedback to be recorded by administrator for collating. |

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| **Purpose** | **Method** | **Lead** | **Frequency** | **How do we know this is being done?** |
|  | Feedback to be evaluated and fed back to Management Team and team to inform service delivery. | Manager with responsibility for admin | Quarterly (or earlier if urgent action required) | Record made in Management Meeting Minutes and Team Meeting Minutes along with associated actions where necessary. |
| Ensure that victim’s views are central to the service provided. | Feedback forms to be sent to all victims following conclusion of YJS involvement with them. | Victim Worker | As required | Completed feedback forms to be returned to administrator for collating. |
|  | Victim feedback to be evaluated and fed back to Management Team. | Manager with responsibility for admin | Quarterly (or earlier if urgent action required) | Information will feed into quarterly feedback report. Specific issues to be addressed through supervision. |
|  | Annual report to be produced identifying themes, issues and proposals for development. | Victim Worker | Annually | Report to be considered in Management Meeting. Record of discussion to be contained within minutes of meeting. |
| Ensure that feedback informs future service delivery. | Evaluation of feedback will inform annual Youth Justice Plan. | Head of Service | Annually | Youth Justice Plan will take account of ongoing feedback to inform future delivery of service. |

**Appendix 1:** *QA process for Referral Order Reports and Pre-Sentence Reports*

**Appendix 2** *QA process for AssetPlus Assessments*