Key Elements of Effective Practice: Quality Assurance Framework

Guidance for youth offending teams and secure establishments

www.youth-justice-board.gov.uk

Youth Justice Board for England and Wales

Contents

Introduction

Identifying and promoting effective practice in the youth justice system is a key objective of the Youth Justice Board for England and Wales (YJB). The YJB has published the *Key Elements of Effective Practice* to promote effective practice and continuing improvement in the delivery of youth justice services - these are available on the YJB website at www.youth-justice-board.gov.uk/publications to download or order. The *Key Elements of Effective Practice* are based on the best available research evidence and aim to ensure that staff working with young people can identify and apply effective practice, wherever they work in the youth justice system.

The *Quality Assurance Framework* has been designed to support the implementation of the *Key Elements of Effective Practice*. It is an integrated cycle of assessment, planning, implementation and review, intended to ensure that all agencies are demonstrating, or working towards achieving, the required standards of process and service.

The cornerstone of the *Quality Assurance Framework* is self-assessment. It forms the basis of a strong process of self-evaluation, across the system, that will underpin priority-setting, business-planning and ongoing improvement. Self-assessment, in one form or another, is already widely used by local government, the voluntary sector and industry. It is a powerful tool used to understand and articulate the issues that influence the focus and direction of a service, and is therefore considered invaluable.

The *Key Elements of Effective Practice – Quality Assurance Framework* is designed to:

- provide a consistent system for evaluating the evidence of effective practice across all youth justice services

- set performance improvement targets and prioritise improvement effort within youth justice services

- facilitate continuing improvement in the work undertaken by youth justice services.

The *Quality Assurance Framework* does not deliver improvement in itself. It should be an integral part of a wider commitment from all agencies and staff to improve the quality and effectiveness of youth justice services. It is now incorporated into the YJB's YOT performance framework, to provide a qualitative dimension to the performance assessment of the YOT.

The *Quality Assurance Framework* is an initiative that helps services to identify their strengths and their weaknesses, and develop a set of balanced and focused targets to work towards improving performance and practice. The framework will deliver the best results to those services that are self-motivated, undertake self-evaluations with rigour and accuracy, and are genuinely committed to further improving their services. Feedback shows that involving staff from all levels of the service in the quality assurance process provides the most robust and accurate assessment and reaps the greatest rewards. It ensures that all services understand how effective practice relates to them and so sign up to delivering the improvement plan.
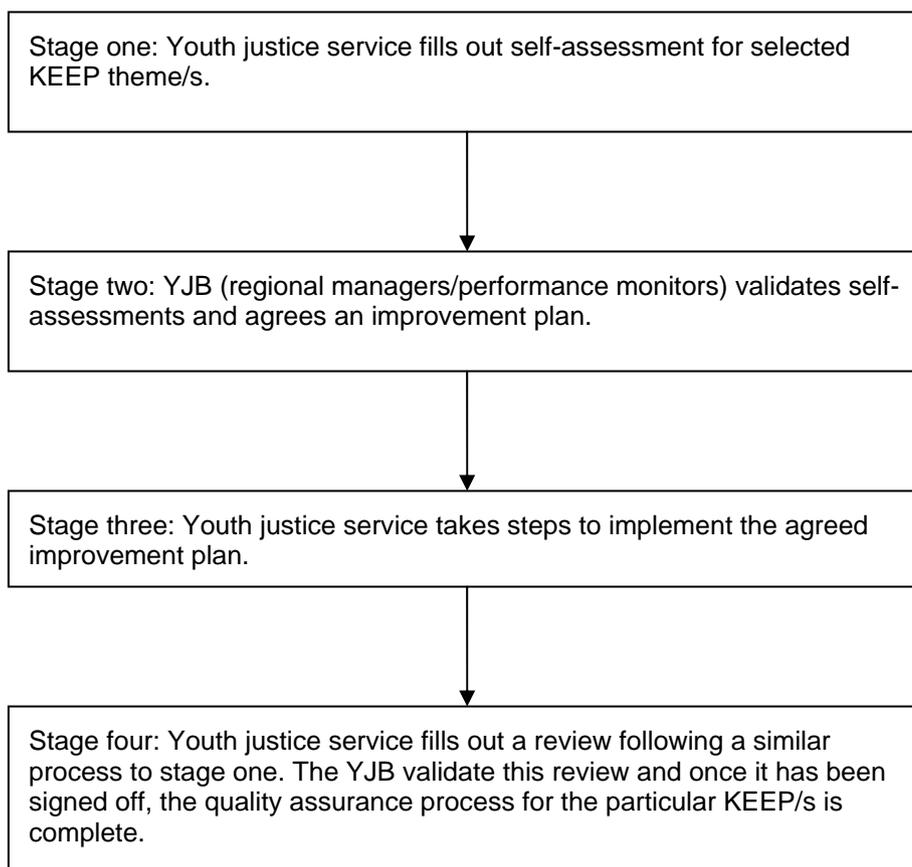
It is up to strategic partnerships, YOT managers and practitioners to commit to the targets and plans, and to work towards achieving them. However, regional managers and performance monitors appointed by the YJB will review the progress made against agreed improvement targets. If required, the regional manager or performance monitor can also recommend further support and assistance from the YJB's internal consultants.

This guide describes:

- the framework

- how it operates

- the tools and templates available to youth justice service managers and staff for completing self-assessments, based on evidence of practice in their local area

- the roles and responsibilities of the YJB in monitoring and supporting the quality assurance cycle.

The Quality Assurance Process

This diagram shows the stages that must be completed either by a service manager or by representatives of the YJB during the quality assurance process.

Stage one: Youth justice service fills out self-assessment for selected KEEP theme/s.

Stage two: YJB (regional managers/performance monitors) validates self-assessments and agrees an improvement plan.

Stage three: Youth justice service takes steps to implement the agreed improvement plan.

Stage four: Youth justice service fills out a review following a similar process to stage one. The YJB validate this review and once it has been signed off, the quality assurance process for the particular KEEP/s is complete.

Stage one: Self-assessment

The self-assessment process requires managers, in collaboration with practitioners, to undertake a review of evidence of practice in their service, using the key indicators of quality in the YJB's *Key Elements of Effective Practice*. Teams with members who have undertaken the Professional Certificate in Effective Practice have often found it beneficial to involve them in the quality assurance process.

The *Key Elements of Effective Practice* are supported by tools specifically developed for selecting evidence and determining ratings, and a web-based information exchange. They are as follows:

- **Sampling guidance**

  This is to assist the service with choosing a sample of evidence, particularly in relation to case files (applies to YOTs only).

- **Ratings guidance**

  This provides a guide to the standards required to reach the ratings 0–3 and suggested sources of evidence.

- **Self-assessment and improvement plan forms**

  These are found on the EPQA website at www.yjb.gov.uk/epqa.

Using the above templates, the service is required to:

- gather evidence from operational bases, including records of supervision or appraisal and strategic partners, and evaluate it to substantiate (or otherwise) the delivery of service against the specified key indicators of quality

- set performance targets in an improvement plan that bridges any performance gaps and improves the quality of service standards over time.

Reviewing the Key Indicators of Quality

Each of the *Key Elements of Effective Practice* contains a list of the Key Indicators of Quality, divided into eight core areas that are common to all the *Key Elements of Effective Practice*. The eight core areas are:

- assessment

- individual needs

- communication

- service delivery

- training

- management

- service development

- monitoring and evaluation.

The YJB recognises that the relative importance of the eight core areas will vary from one subject area to another.

There are two Key Indicators of Quality per core area, producing 16 indicators for each of the *Key Elements of Effective Practice*. The YJB sees this as a representative and manageable set of indicators, rather than a comprehensive list of quality issues.

Youth justice services carrying out a self-assessment should remember that the Key Indicators of Quality are only brief summaries and so should always refer to the full guidance on each of the core areas given in the *Key Elements of Effective Practice*.

Choosing the right evidence

When collecting evidence, it is important to ensure that samples are drawn from a range of interventions and orders, as evidence should relate to all relevant activities. However, there are exceptions, for example, when assessing practice in relation to a particular stage in the youth justice system.

It is also important to ensure that samples of the work of practitioners, managers and strategic partnerships are gathered. The core areas of effective practice relate to the three tiers of roles differently.

Assessment, individual needs, communication and service delivery relate particularly to practitioners, while training, management, service development, and monitoring and evaluation are more relevant to managers. Service development, and monitoring and evaluation also apply to strategic partnerships. However, managers and strategic partnerships will also need to show evidence of their involvement in the other core areas, in terms of their oversight of the YOT's practice, and their planning of services and resources.

Completing the self-assessment form

The self-assessment form is located on the EPQA website, and is used for recording the evidence and evaluation rating against each of the Key Indicators of Quality. The information provided here will help to:

- set the baseline rating for future *Key Elements of Effective Practice*

- substantiate the evidence ratings managers allocate themselves

- enable planning for service enhancement in areas where indicators rate below 2

- plan for local improvement or consolidation of practice where the rating is 2 or 3.

The web-based template has been developed to enable services to capture the range of data and evidence locally available to substantiate performance against each of the Key Indicators of Quality. As it is electronic, this provides an audit trail to assure the process is evidence-based, as well as locating and identifying the evidence for future validation.

Guidance on evidence

Examples of the evidence that managers may decide to use during the self-assessment process are provided in appendices A and B. Each of the *Key Elements of Effective Practice* has either a correlating supporting evidence tool listing a sample of the types of evidence managers need to see in place at a local level for all Key Indicators of Quality, or a more detailed tool with guidance indicating the varying standards of evidence required to achieve a rating of 0, 1, 2 or 3. This guidance relates to the eight themes either assessed since 2003 or due to be assessed over 2005 and 2006.

The examples provided in the tools are not intended to be exhaustive or mutually exclusive – they are a sample only. Managers will need to decide for themselves what evidence is relevant and appropriate during the self-assessment process.

Evidence gathered for choosing or reviewing a rating should be taken from sources such as case records (i.e. paper files and case management system records), records showing protocols and written procedures, supervision meeting notes, minutes of steering group meetings, and aggregated data. A range of evidence is important for ensuring that the full range of youth justice services, and their planning and resourcing, are captured in the self-assessment, validation and review process.

Guidance on sample sizes for the YOT quality assurance process in 2005 and 2006 is available on the YJB website at www.yjb.gov.uk/practitionersportal/practiceandperformance/effectivepractice/qualityassuranceframework.

Evidence rating system

Following the identification and recording of appropriate evidence using the self-assessment template, the manager will need to evaluate the quality and quantity of the evidence for each indicator. The evaluation of evidence is set through the use of a common rating system. This is detailed below in Table 1. It uses a four-point rating scale that measures the weight of the evidence of effective practice provided. The YJB's validation process will help to ensure that this common rating system is being consistently applied across the youth justice system.

Table 1: Evidence rating scale

0	Little or no evidence of effective practice exists
1	Some evidence that effective practice is being followed, but not by all practitioners, managers and strategic partners
2	Evidence that effective practice is mostly being followed, but is not system-wide
3	Evidence that effective practice is being followed consistently and systematically, by practitioners, managers and strategic partners

An overall rating for each of the *Key Elements of Effective Practice* will also be determined. The EPQA website will automatically calculate the average by adding up the ratings for all Key Indicators and dividing the total by 16. This is rounded up to the nearest whole number. For YOTs, the average rating (to 2 decimal places) will be incorporated into the YOT Performance Framework, and will be used to inform the overall performance assessment.

Completing the improvement plan and summary page

The purpose of the improvement plan is to ensure that actions are put in place for those areas where service is weakest and most improvement is needed. It is not expected that improvement actions will be required for each of the 16 Key Indicators, as this could make it difficult to manage and attain all the targets. The plan should be a high level indication of the priority actions only. A more detailed list of actions to support the key target actions may be needed locally, but the YJB will not require these.

Initially, the aim will be to get each area of practice up to a rating of at least 2. Those Key Indicators with a rating below 2 should be targeted in the improvement plan. All zero ratings must be addressed as the highest and most immediate improvement priority. However, services with ratings of mostly 2 or 3 should consider how further improvements can be made, or how to ensure the effective practice already in place is consolidated. All services, no matter how well they have rated, should be committed to continuing improvement across their entire service.

As with all planning processes, YOT managers and strategic partners will need to consider a range of issues such as:

- the likely effectiveness of the planned action delivering the required improvement level

- how to progress the specific action

- the time/cost to be expended in undertaking the action

- the resourcing implications of managing the improvements and ensuring they are delivered.

Not all of these considerations are included in the improvement plan template, as some of them are internal management issues. However, if the YJB regional manager/performance monitor is concerned about how deliverable a proposed improvement action is, or about the plan itself, they may request more information than that documented in the improvement plan.

The draft improvement plan should be completed using the electronic template on the EPQA website and submitted with the assessment of evidence and ratings. They should ensure that for each target, the following elements are included:

- area of improvement – i.e. the practice area to be addressed

- improvement action – a *measurable* target to identify how improvement can be achieved

- owner of action – a named person who is responsible for delivery of the target

- specified deadline – timescale for achievement of the targets (deadlines for each target should be staggered).

On the web-based forms, there is also a space, above the overall rating for the service, for contextual information. This is provided so that the manager can give brief information about any risk factors or local pressures affecting the ratings or possibility of achieving improvement, for example staffing problems. The text box is limited to 3,000 characters, so the information should be concise.

Submission to the YJB

Once the service manager has completed the self-assessment and improvement plan, the form should be submitted via the EPQA website. An electronic form is available for all *Key Elements of Effective Practice* scheduled for assessment.

To access the website the uer should enter their login and password details. YOTs, secure children's homes and secure training centres have all been given a username and password.

New managers who require a login and password should send an email request, with the name of both the manager and YOT or establishment to: [epqaadmin@yjb.gsi.gov.uk.](mailto:epqaadmin@yjb.gsi.gov.uk) For assistance in using the EPQA website, managers can find a user guide by clicking on the 'User Manual' link.

Forms should be submitted to the YJB by the agreed deadline to enable the regional team to undertake a preliminary evaluation and, where applicable, arrange a site visit. Early submission is encouraged to ensure that validation can be completed as soon as possible. For YOTs, submission beyond the deadline may result in grant payment being withheld and could also affect their performance rating in relation to the YOT performance framework.

Stage two: Validation

As the cornerstone of the *Key Elements of Effective Practice – Quality Assurance Framework* is self-assessment, the best results will always be achieved by those services that undertake rigorous self-evaluations of their strengths and weaknesses, own their improvement strategies, and are genuinely committed to implementing ongoing improvement.

However, the YJB recognises that some services will be better placed than others to plan and deliver performance improvement and there is also a need to ensure evidence ratings are applied consistently. The YJB has, therefore, put mechanisms in place to provide support and guidance to services that need it and calibrate evidence ratings across services.

YJB regional managers and performance monitors are responsible for overseeing the implementation of the quality assurance process. In relation to effective practice and quality assurance, the role of the regional manager and performance monitor is to:

1. validate the quality assurance evaluation undertaken by the services

2. set the baseline rating for the service

3. assist and support services to implement the required performance enhancements

4. review achievement against planned performance improvement targets and validate the final assessment.

The YJB has recently reviewed the role of validation to confirm its role and purpose and has agreed that it should continue for the following reasons:

- to gather intelligence to inform performance monitoring

- to support improvement

- to identify emerging and effective practice

- to validate other performance information, e.g. KPIs

- for moderation/assurance of ratings

- to confirm compliance with grant conditions in the case of YOTs.

Validation of baseline ratings and improvement plan

As explained in the previous section, service managers are required to submit, via the EPQA website, their completed, service-wide, self-assessments and draft improvement plans for the effective practice themes, to the regional teams. The information will be cross-referenced with other information available to the YJB on the service, including:

- the Youth Justice Plan

- quarterly and annual data returns

- information on the secure estate gathered through the Effective Regimes Monitoring Framework.

Approaches to validation

In most cases, when a service submits its self-assessment and improvement plan, the appropriate regional manager or performance monitor will consider both and arrange a date to visit the service for the purposes of validation. Secure children's homes will receive a visit in line with the conditions set in their contract.

However, in light of the review of the role of validation, the YJB is now adopting a risk-led approach to validation in YOTs, to align the EPQA process more closely with the approach to performance monitoring being taken in the regional teams and Wales. This approach means that the regional teams will consider YOT submissions in brief, against a set of criteria, to determine whether the YOT is sufficiently high-performing or low-risk to be granted exemption from on-site validation. These criteria are available from the regional teams.

If the YOT qualifies for exemption, the regional manager will inform the YOT manager and offer them a chance to 'opt out'. If they decide to opt out, validation will be conducted via a brief desktop audit. If they would prefer to receive a visit, the regional team will arrange this.

Exemption from on-site validation is also applicable to YOTs within 'excellent' local authorities. Local authorities that received an 'excellent' rating on their Comprehensive Performance Assessment (CPA) have been granted a 'holiday' from inspections. The YJB has therefore agreed with the Office of the Deputy Prime Minister that YOTs within 'excellent' authorities will receive a light-touch audit. They are required to complete a full self-assessment and improvement plan for the relevant *Key Elements of Effective Practice* as a condition of their grant, but the regional team will not carry out a validation visit unless it is requested.

The regional manager/performance monitor will review the self-assessments and improvement plans, but they will not reduce any ratings as they will not see evidence to confirm or disprove the ratings. The exception to this would be if it is clear from the assessment that there is a disparity between the YOT's assessment of evidence and the ratings they have given themselves.

In some instances, they may have given themselves a higher rating than seems warranted by the description of the evidence used to support it. In this case, the regional manager should write to the YOT manager raising the issue and asking for additional evidence, in support of the rating, to be provided within a reasonable timeframe, e.g. two weeks. The letter should make it clear that if the YOT fails to provide additional evidence within this period, the regional manager may then amend the rating on the web-based assessment form in accordance with their findings.

Outline of on-site validation process

Validation is not an inspection process. It is a process based on verifying evidence, not interviewing staff. When the regional manager/performance monitor visits the service they will examine the following:

- evidence upon which the self-assessment ratings are based

- how the evidence of performance was evaluated

- issues identified in the draft improvement plan with respect to:

  - clarity of task

  - appropriateness of timescale

  - realism of targets

  - ability to deliver overall outcome.

The regional manager will not validate the improvement plan, but will offer comments on whether it is SMART (specific, measurable, achievable, realistic and timebound), and whether it is likely to result in the overall target rating being reached. They will also set the baseline or final ratings.

Before the visit, the YOT or secure establishment should be contacted to explain what information the regional manager/performance monitor will need on the day. Managers will need to ensure the evidence used in their self-assessment is available, and a random sample of open and closed files may also be called upon. This will allow the regional manager to judge whether the sample used by the service is representative of its general practice.

A validation visit should not last longer than two days. Regional teams will liaise with the individual YOT to arrange a specific timetable of the visit.

Sampling evidence

The regional manager/performance monitor will use the ratings guidance found in appendix B to select evidence and determine ratings. Any comments and ratings should then be recorded on the EPQA website to ensure the information is available at all times.

Evidence will be sampled according to the following process:

1. Evidence will be assessed in relation to each of the three tiers of practitioner, manager and strategic partnership, for each KEEP theme being validated. Evidence should be assessed from one core area per tier. For example, evidence could be taken from Assessment (for practitioners), Management (for operational or YOT managers) and Service Development (for strategic partnerships). As an indication, those carrying out validation should aim to look at six Key Indicators of Quality per KEEP theme.

2. Evidence assessed during validation should be a mixture of the sample used by the service and a random sample. When sampling case files, they should equate to 5% of the total caseload. However, where a theme being assessed relates to a specific type of case, e.g. Detention and Training Orders (DTOs) for Resettlement, this may result in a small number of cases. In this instance, a minimum of 10 cases should be considered for each KEEP theme.

3. The focus of a validation visit will be on assessing evidence to verify the YOT's self-assessment, not discussing details with YOT staff. It is important to distinguish this process from inspection. However, where clarification is needed, spending some time with operational managers may be helpful.

During the validation visit, the service manager, regional manager/performance monitor and other stakeholders should discuss and resolve any issues before agreeing the baseline evidence rating and proposed improvement actions. Ideally, the service manager and the YJB regional manager/performance monitor should agree the evidence rating and every effort should be made to ensure this happens.

However, where agreement cannot be reached, the YJB regional manager/performance monitor will determine the rating, and ensure it is consistent with other ratings across the relevant youth justice sector. They must make clear on the web-based forms their reasons for reducing the rating. There is no appeal process and the regional manager's/performance monitor's ruling is final. The YOT manager and the regional manager/performance monitor should also record the reasons for the disagreement on the web-based form to ensure a complete audit trail of issues is maintained.

Sign-off

Following the meeting, the improvement plan may need amending. To allow the service manager to do this, the regional manager must ensure that the forms are 'returned for amending' via the website. If this is not done, and the website shows 'Regional Manager validating' against the plans, the service manager will not be able to amend them.

For secure establishments, the plan will be ready for implementation once the regional manager/performance monitor and the service manager have agreed the ratings and improvement plan.

In the case of YOTs, once any amendments have been made, the comments of the strategic partnership must be recorded. This will need to be done by the regional manager/performance monitor. If the steering group representative attended the validation meeting, any comments made here should be recorded on the template. However, if the steering group representative was unable to attend the meeting, the regional manager will need to ensure that they discuss the self-assessment, ratings and improvement plan with them. In this instance, the regional manager can obtain sign-off via the telephone or written correspondence. They can print the summary page or whole form from the website, and then forward to strategic partners for their comments and approval. There is no need to arrange a separate meeting purely to approve the improvement plan and obtain sign-off.

Once the strategic partnership has given its approval, and their comments are completed on the web-based form, the plan can be finalised and implemented. Once approval has been obtained, the validated ratings are included in the YOT performance framework to provide a qualitative element to the YOT's overall performance.

Support

Support to YOTs comes in the form of a general grant. Provision of the grant is dependent on the YOT meeting a number of conditions, which include implementing the *Quality Assurance Framework*. In addition, the YJB has developed a performance improvement model, whereby experienced youth justice practitioners and managers can be made available to YOTs to help improve performance and provide support where there is a clear need. These resources will be delivered to those YOTs most in need of assistance, and usually where there is a clear indication support will be welcomed.

Stage three: Implementing the improvement plan

Once the improvement plan has been signed off, it is up to the manager in the YOT or secure establishment to ensure it is put into action. In the case of YOTs, a steering group representative is also identified as a sponsor of the plan and is recorded on the EPQA website. Their role is to oversee the implementation of the improvement plan. As the EPQA cycle runs for up to two years they must ensure the improvement plans are underway and on track to meet the deadline for improvement.

Mid-term review

Approximately midway through the cycle, YOTs and secure children's homes will be asked to provide a progress report against their improvement plans. This will not be through the EPQA website, but offline, with a brief indicator of whether each target is met, underway, not yet started or no longer applicable. Where targets have not been met, some indication of when it is planned they will be should be provided.

Where a service feels it has already achieved the target rating against a *Key Element of Effective Practice*, it will not be required to aim for a further improvement in ratings. However, the service manager should consider the original improvement plan for possible amendments. It may be that further work is needed to ensure that the achievements made are consolidated and maintained, since the service will be fully reviewed at the end of the cycle.

Those who have not reached their target rating by the time of the progress review should consider their improvement plans to check they are on track to meet their targets by the final deadline. They may also need to amend their improvement plans offline to ensure they reach the target rating. The focus should be on improvement against the *Key Element of Effective Practice* in which they are weakest, and consolidating good practice in those areas in which they have improved or are achieving a high standard.

The regional managers/performance monitors will make local arrangements with the YOTs and secure children's to provide progress reports. A suggested format for this is attached in appendix C. They will then arrange a visit to the YOT or secure establishment to discuss the improvements achieved to date, which will be in conjunction with any planned visits for validation of self-assessments.

It is not expected that the regional manager/performance monitor will want to look at evidence in detail, but they may wish to see evidence to demonstrate progress where a target has been reached. Any required amendments to the improvement plans should also be discussed and agreed during this visit.

Stage four: Review

Completing the review

At the end of the quality assurance cycle, service managers will need to complete a full review of their baseline ratings against the *Key Elements of Effective Practice* on which they have been assessed.

Service managers should review the evidence in support of every Key Indicator of Quality for each of the *Key Elements of Effective Practice*, and consider what the final rating should now be. The review should follow the same steps followed in the original validation (see pp. 11–15) using the ratings and sampling guidance, included here at appendices A and B, to determine evidence, sample size and ratings.

The original self-assessment forms on the website will contain new sections for this review, which the service manager should use to conduct the final self-assessment of their evidence. They should submit the reviewed self-assessments, via the EPQA website, to the YJB's regional manager/performance monitor for validation.

Validating the review

At the end of the quality assurance cycle, the regional manager/performance monitor will consider the self-assessments and ratings, and carry out validation by assessing the evidence. They will then record their final ratings. Again, this will be using the web-based forms, where there will be new fields for their comments and ratings, following review. The validation process will follow the same steps outlined in Stage Two, except that the improvement plan will not need approving as targets should have been achieved by this point.

The final ratings and achievements made should be discussed and agreed between the regional manager/performance monitor, service manager and, in the case of YOTs, a steering group representative. As before, it is preferable for the service manager and the regional manager/performance monitor to agree the final evidence ratings but, where agreement cannot be reached, the regional manager/performance monitor will determine the rating and ensure it is consistent with other ratings across the youth justice system.

There is no appeal process and the regional manager/performance monitor ruling is final, but the YOT manager and the regional manager/performance monitor should record the reasons for the disagreement on the review form before the final sign-off.

The regional manager/performance monitor and the service manager should also provide comments on actual performance enhancements achieved and, where targets have not been achieved, the reasons for this and what is being done, or will be done, to address it. For YOTs, once final ratings have been agreed, these will be included in the YOT performance framework to provide an improvement rating for each YOT. This ensures that the progress made by YOTs is assessed and they are rewarded for improvement, as well as general performance.

At the conclusion of the quality assurance cycle, any service that has failed to achieve performance improvement against any one of the *Key Elements of Effective Practice* may be required to complete another quality assurance cycle for the relevant element. In some cases, support and/or intervention may be required to assist the service in making improvements, through the YJB's performance improvement strategy (see p. 15).

Appendix A: Supporting Evidence Tools

Mentoring

Key Indicators of Quality	Examples of Evidence to Consider
Assessment	
There are clear guidelines for identifying the young people the programme aims to recruit.	▪ Recruitment targets for young people from prioritised need groups ▪ Guidelines on priorities available to relevant staff ▪ Linkages between setting of the recruitment targets for young people and the priorities of the Youth Justice Plan
Potential mentors should be screened to identify those that have the greatest understanding of the role and the interpersonal skills and commitment to put it into practice.	▪ Evaluation of the local criminal records screening process and strategies for enhancement where necessary ▪ Screening tool for volunteers in place with appropriate staff training in its use ▪ Regular evaluation of use of the screening tool
Individual Needs	
The framework and structure of programmes should depend on the young person's age, maturity, and developmental and cultural needs and any local issues.	▪ Guidance on the framework and structure of mentoring programmes, showing how to adapt to young people ▪ Usage of the framework and structure guidance provided ▪ Documentation of age and gender-specific supports and use of appropriately sensitive materials ▪ Successful engagement in ethnically/culturally sensitive community networks
The specific factors that determine the structure of a young person's programme should be established early on in the mentoring relationship and should be reviewed and adapted regularly.	▪ Evaluation of correspondence between mentors and young people on dimensions of age, gender, ethnicity ▪ Records of planning, reviews and programme revisions
Communication	

There should be regular meetings between the mentor and the young person.	▪ Record of contacts between mentors and the young people on file
	▪ Record of contacts contains information on:
	  o the objectives of meetings
	  o the nature and frequency of access to structured group activities

Simple, clear, age-specific, culturally sensitive literature should be developed to explain mentoring programmes to young people. This literature should take into account the language and literacy levels of the young people the programme is trying to	▪ Materials available to individuals with differing needs reflecting:
	  o literacy levels
	  o languages other than English
	  o disability

Key Indicators of Quality	Examples of Evidence to Consider
engage.	

Service Delivery

Key Indicators of Quality	Examples of Evidence to Consider
Goals for the programme should relate specifically to the young person, be owned by them and be SMART (Specific, Measurable, Achievable, Realistic and Time-bound)	▪ Evidence of how the goals of intervention are linked to an assessment of need and risk ▪ Evidence of young person's contribution to the planning, review and programme revision process ▪ SMART methodology used to document programme goals
Structured, regular group activities, monthly/bi-monthly group trips and activities with a residential element should be provided.	▪ Range of approved group activities documented and regularly reviewed ▪ Evidence of the nature and frequency of access to structured group activities ▪ User evaluation of group activities

Training

Key Indicators of Quality	Examples of Evidence to Consider
Mentors need to be trained to work to the aims and objectives identified for the young person within the programme.	▪ Protocols and procedures for mentoring are established ▪ Protocols and procedures for mentoring are routinely monitored and evaluated ▪ Mentors contribute to reviews and enhancements to the protocols and procedures
Training for mentors should focus on communication skills, motivation skills, ideas about relationship building, interaction with young people, setting boundaries, child protection issues, goal setting, and values and diversity awareness.	▪ A formal training programme for mentors is in place which is regularly evaluated and reviewed ▪ There is training prior to mentors engaging with young people ▪ Staff are trained in the delivery of the mentors' training programme and provide active on-going support to them on request

Management

Key Indicators of Quality	Examples of Evidence to Consider
Matching mentors to young people should be clearly managed and criteria for this should be developed and consistently applied.	▪ Criteria for matching mentors and young people are documented ▪ Designated staff have responsibility for and have been trained in the matching process ▪ Evaluation of correspondence between mentors and young people on dimensions of age, gender, ethnicity
The relationship between the mentor and the young person should be supported, as intensively as possible, by a case manager who is in contact with the parents/carers of the young person, the young person and the mentor.	▪ Designated staff have responsibility for and been trained in the supervision and support of the relationships between the mentor and the young person ▪ Supervision and support sessions are routinely documented ▪ Supervisors' contacts with the parents or guardians of young people are routinely documented

Service Development

Key Indicators of Quality	Examples of Evidence to Consider
A local protocol for working with young people that covers staff selection, staff skills, staff training, on-going support and, for those working in the secure estate, security should be developed.	▪ Evidence of the local protocol covering staff selection, staff training and on-going support ▪ Monitoring and evaluation of the local protocol ▪ Evidence of the strategic partnership overseeing evaluation of protocol implementation
Clear referral procedures should be developed and should be	▪ Referral procedures are documented and distributed to staff

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Key Indicators of Quality	Examples of Evidence to Consider
consistently followed.	▪ Staff training in mentoring referral processes and programmes ▪ Referral routes and outcomes for mentoring programmes are regularly monitored
Monitoring and Evaluation	
Mentoring should be fully monitored and reviewed. Where appropriate, it should be independently evaluated. All monitoring and evaluation should be against a series of established benchmarks and indicators of effectiveness.	▪ Specific arrangements are in place for monitoring mentoring referral, planning, review and closure processes ▪ Processes for independent evaluation are employed ▪ Evaluation results are fed into strategic partnership and planning processes
Effective and efficient case recording systems should be established and maintained. In principle, they should monitor meetings between staff, mentors and the young person they are working with.	▪ Record of contacts between the mentors and the young person are on file ▪ Records of planning, reviews and programme revisions are on file ▪ Grievance procedures are in place and monitored

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Offending Behaviour Programmes

Key Indicators of Quality	Examples of Evidence to Consider
Assessment	
Information about levels of risk and needs should be gathered, using suitable procedures, for every young person.	- Prior assessments are completed within National Standard requirements - Assessments are documented on case files - Assessment forms clearly identify the potential level of risk and priority for individual cases - Records of final *ASSET* completion
The assessment information (including *ASSET* and other sources) should be properly used to make programme selection and allocation decisions.	- Guidance available on specific factors which need to be taken into account when gathering information for programme allocation - File records show that chosen interventions are consistent with the assessment of the young person and their offending behaviour and linked to theoretical frameworks which are suitable for the young person given their history of previous responses - Assessments systematically capture the reasons for the young person's offending behaviour, circumstances in which the offence was committed and the effect the offence has had on the victim - Reasons for prior assessment not leading to an intervention are recorded in case files
Individual Needs	
The selection of an appropriate programme for a young offender should be informed by an assessment process.	File records show that chosen interventions are consistent with the assessment of the young person and their offending behaviour and linked to theoretical frameworks which are suitable for the young person given their history of previous responses
The range of programmes should reflect the diversity and individuality of young people.	- Programmes on offer that address the different types of sensory equipment which individuals may use and how these work - Programme design reflects principles of equality, diversity and anti-discriminatory practice
Communication	
All members of the youth justice system, as well as the families of young people, should be made aware that programmes exist.	- Records of consultation with parents/carers of young people - Written record of successful programme completion is provided to offenders - Written record of successful programme completion is provided to other agencies, e.g. police, courts - Evidence of non-compliance is provided to the police and courts on subsequent offending
Information about programmes should be communicated to and clearly understood by young people referred to or participating in them	- Information provided to young people covering: - what will be entered in their records, how the records will be stored and who will have the right of access to them - how the interventions will be evaluated and reviewed and their role within this process - Reviews with young people cover their progress in

Key Indicators of Quality	Examples of Evidence to Consider
	changing their offending behaviour and encourage them to understand and value their achievements ▪ Formal agreements concluded with young people how they will put the plan into action, the roles of different people in the plan and how progress will be reviewed
Service Delivery	
Programmes should focus on certain aspects of a young person's life that have been shown to be risk factors for criminal activity.	▪ Examples of clear links between the overall sentence plan and the activities planned ▪ Elements of programme content focus on key risk factors e.g. addressing deficiencies in social skills, thinking and behaviour ▪ Use of methods for enabling individuals to change their offending behaviour (such as motivational interviewing, cognitive behavioural methods, adult learning methods, solution-focused therapy) and evaluation of their effectiveness ▪ Arrangements for sign-posting young people to relevant services outside core programme

Each programme should include a series of structured sessions often, though not exclusively, group-based sessions.	▪ Plans for programme sessions feature activities which are appropriate to the age, communication, sensory and general abilities, interests, experiences and plan of care of the child or young person
	▪ Records for individual sessions covering:
	  o what the intervention aims to achieve and how it relates to any other work being undertaken with the young person
	  o the participation and contribution of each young person
	  o reasons for the non-attendance of any young person
	  o changes in needs and circumstances
	  o difficulties which agencies experience in working with young people and their families
	▪ Programme delivery is adapted for different groups of individuals with differing needs and the special needs of particular individuals or groups of individuals
	▪ Mix of group and one-to-one programmes are available depending on assessment of risk or needs of young person

Training	
Staff should receive training in the theoretical basis for the programmes and how they are delivered to young people.	Training programme cover: ▪ the ways in which stereotyping and discrimination might affect risk assessment and how to guard against this ▪ the ways in which it is necessary to alter communication when working with different individuals and representatives of different agencies ▪ methods of encouraging the effective involvement of the individual in the assessment ▪ relevant research into the relationship between factors and difficulties, evidence of effective practice in tackling these and how the worker has applied this evidence in their work

Key Indicators of Quality	Examples of Evidence to Consider
Managers should consider feedback from trainers on the competence, confidence and commitment of staff in selecting appropriate staff to deliver these programmes.	▪ Methods of evaluating the worker's own competence, determining when further support and expertise are needed and the measures taken to improve own competence

Management

There is a clear understanding and support of the rationale for these programmes.	▪ Responsibilities of the team and its individual members relating to programme development and delivery are clearly defined ▪ Objectives and individual work plans ▪ Managerial action to involve other agencies in programme delivery ▪ Management involvement in evaluating programme integrity ▪ Managerial action to improve programme integrity
Staff training and appropriate levels of supervision and support are provided for both the development and delivery of these programmes.	▪ Range of training courses on offer and records of training completed ▪ Evidence of contingency arrangements for staff illness and absence ▪ Procedure for staff supervision and appraisal is in place and up to date

Service Development

A portfolio of programmes designed to address the offending behaviour and associated needs of the target population of young people should be developed.	▪ Analysis of characteristics of offending population is used to shape development of portfolio of offending behaviour programmes ▪ Fit between assessed needs and coverage of portfolio of programmes ▪ Evidence of strategic partnership overseeing the evaluation of portfolio development

Managers should ensure procedures are put in place to integrate these programmes with all other aspects of service provision.	▪ Arrangements for sign-posting young people to relevant services outside core programme
	▪ Portfolio of programmes includes information on the programme provider's role and how this interacts with the roles of others
	▪ Service level agreements are in place to regulate the contribution of external programme providers, covering:
	  o quality standards
	  o case and risk management procedures
	  o information sharing and confidentiality
	  o handover arrangements at the closure of an intervention

Monitoring and Evaluation

Monitoring data should be collected and recorded including information on rates and types of referral, intake, commencement, participation and completion.	▪ Agencies offer feedback on progress, the effectiveness of their work and their feelings about their contribution ▪ Systems to record assessment, programme delivery and completion in individual cases ▪ Systems in place to aggregate and analyse data on programme delivery and completion
Short-term changes that occur as	Systematic post-programme evaluation in individual cases

Key Indicators of Quality	Examples of Evidence to Consider
a result of participation in programmes, must be evaluated using suitable methods.	

Restorative Justice

Key Indicators of Quality	Examples of Evidence to Consider
Assessment	
There must be clear reasons for referring a young person to a restorative scheme and managers should make sure each case has clear aims and objectives and that these are assessed to see if they should be dealt with in a restorative way.	▪ Criteria for referral to restorative schemes are clearly documented and accessible to staff ▪ Assessment considers the reasons for the young person's offending behaviour, circumstances in which the offence was committed and the effect the offence has had on the victim ▪ Reasons for referring a particular case to a restorative scheme (including fit with overall objectives for case) are recorded on file ▪ Reasons (e.g. safety or special needs) for using either direct or indirect reparation are on file
Parents/carers must be included in any assessment of the young person's suitability for restorative work.	▪ Links with family and community networks are included in assessment ▪ Output of consultation with parents/carers is recorded on file
Individual Needs	
The victim and the young person are treated with respect and the young person is helped to learn new skills.	▪ Range of materials are available to cater for individuals with differing needs, for example disability, sensory impairment, languages other than English ▪ Programmes have the victim perspective incorporated into them ▪ Equality and anti-discriminatory practice is addressed ▪ Programmes focus upon skills development (e.g. social skills, thinking and behaviour) ▪ Records of young people's achievements/progress ▪ Aims and objectives of support services are documented with details of out of office hours contact accessible to staff
Young people should complete all the tasks set for them in the conference or mediation session, and gain educational or vocational skills in the process.	▪ Specific targets are set in agreements with young people ▪ Records of young people's attendance ▪ Records of young people's achievements/progress ▪ Referrals to educational and vocational services are on file ▪ Referrals to support services link to risk and need of victim and young offender
Communication	
Both the victim and the young person should be told who will receive information about them.	▪ Materials used to explain who will receive information about them and the limits of confidentiality ▪ Procedures for keeping information on the victim separate and confidential ▪ Protocol with police on information exchange and confidentiality of victims ▪ Guidance for staff on treatment of information and confidentiality

Key Elements of Effective Practice: Quality Assurance Framework

Key Indicators of Quality	Examples of Evidence to Consider
All those involved in a restorative meeting should be given a clear explanation of what will happen and appropriate support and information to enable them to participate in it. The views of everyone involved should be taken into account and any decisions or solutions should be properly discussed with both victim and young person.	- Materials provided to participants explain: - restorative justice approaches - expectations of behaviour and ground rules; - consequences of non-compliance - Opportunities for support for both victims and young people and mechanisms for access to them - Arrangements, e.g. coaching and/or pre-meetings, to prepare young people for mediation sessions - Views and comments of participants are captured on file

Service Delivery

Indirect reparation can be used as part of a negotiated agreement with the young person. Any indirect reparation should take into account the views of the victim.	- Contract between the young person and the YOT for community payback schemes is on file - A range of community payback options are available - Programmes have the victim perspective incorporated into them - Communication with victim is on file with their views clearly recorded
A secure venue should be used, but it should also allow the victim to feel as comfortable as possible.	- Practice guidance on security procedures and precautions is available to staff and up-to-date - Link between assessment (risks and needs) and approach on programme delivery is on file - Records of communication between victim and facilitator on what to expect are on file - Feedback from victims after the meeting

Training

Practitioners should be properly trained and experienced in working with victims, taking face-to-face meetings, using *ASSET*, risk assessment, matters of safety and special needs.	- There is training to an approved standard prior to staff undertaking assessments - There is training to an approved standard prior to staff undertaking work with victims, offender facilitating meetings - Health and Safety (Young Persons) Regulations 1997 requirements are captured through training - Anti-discriminatory service delivery is captured in training - Systems for monitoring training undertaken are in place and records are up to date - Contingency arrangements for staff illness and absence
Good quality training in victim awareness, group dynamics, communication, mediation, listening, confidence, managing anger and chairing meetings should be provided.	- Training modules capture the range of core skills identified in the *Key Elements of Effective Practice* guidance - Systems for monitoring training undertaken are in place and records are up to date - Development through appraisal and individual targets - Supervisions and support arrangements for volunteers as well as full-time staff

Management

The training and personal qualities of mediators and facilitators are much more	Recruitment procedures ensure that staff are police checked and Department of Health checked before being recruited

Key Elements of Effective Practice: Quality Assurance Framework

Key Indicators of Quality	Examples of Evidence to Consider
important than their backgrounds. They should be recruited from diverse backgrounds in order to reflect the make-up of the local population.	- Strategies for recruiting volunteers from local communities - Systems for monitoring recruitment data are in place - Data on recruitment reflects the make-up of the local population
Managers should provide commitment and support for restorative work, make sure all staff understand the basic principles of restorative work and provide regular supervision for staff to keep a check on good practice.	- On-going and regular staff supervision - Staff development and achievement - Appraisal and supervision linked with training
Service Development	
Restorative justice is more effective when linked with interventions that address identified needs. Consequently, it needs to be supported by a range of interventions in the local area.	- Programmes relate to specific individual needs identified in the assessment processes - Joint working arrangements with other agencies - Service level agreements with external service providers - Case and risk management guidelines are developed in service level agreements
There should be a local policy for working with victims and sufficient resources for any work carried out.	- Protocol with local victims' services on information exchange and confidentiality of victims - Protocol with local probation service on information exchange in relation to consultation with victims of violent or sexual offences prior to the offender's release - Full range of restorative options is available
Monitoring and Evaluation	
The impact of the restorative procedure on young people should be monitored and information from routine monitoring should be fed back into the local victim policy and Crime Reduction Strategy.	- Systems to record assessment, programme delivery, completion and post-programme evaluation in individual cases - Systems in place to aggregate and analyse data on participation, programme delivery and completion - Process for feeding evaluation findings into local victim policy - Modifications to the policy in the light of evaluation data - Process for feeding evaluation findings into the Crime Reduction Strategy - Modifications to the strategy in the light of evaluation data
Strategic partnerships should require monitoring information to be provided at regular intervals on the practice and outcomes of restorative work, including the impact on victims.	- Systematic provision of data to strategic partnership - Intervals and time periods when data is systematically collected and evaluated - Improved effectiveness of restorative approaches in response to monitoring data - Strategic partnership overseeing evaluation of protocol implementation

Swift Administration of Justice

Key Indicators of Quality	Examples of Evidence to Consider
Assessment	
Practitioners should complete *ASSET* forms promptly.	▪ Completed *ASSET* forms are on file ▪ Relevant court listings will show whether forms were filled in on the day of first hearing
All assessment information should be transferred promptly and appropriately.	▪ Procedures for undertaking assessments and transferring to the court ▪ T1(V) forms and correlating court listings will show they were filled in on the day of first hearing
Individual Needs	
A strategy should be in place to ensure that persistent young offenders (PYOs) are being prioritised.	▪ Documented procedures for prioritising PYOs ▪ Multi-agency agreement on PYO targets, illustrating the active involvement of the YOT ▪ PYO status is clearly identified on paper and electronic files for relevant cases
Full consideration should be given to whether to prioritise young people other than PYOs and apply the same service to these groups.	▪ Guidance is available for practitioners on determining whether to fast-track youths who are not PYOs ▪ Case records confirm youths whose cases are to be prioritised, with an explanation of the reasons for doing so
Communication	
Clear communication with other criminal justice agencies is essential to ensure that young people are managed efficiently through the administration of justice process.	▪ Minutes of regular meetings with other agencies in which the YOT has taken an active role, with regard to the swift administration of justice ▪ Communications from managers to staff about the methods for effective liaison with other agencies ▪ An officer has been nominated to attend case progression meetings and exchange information and ideas with other criminal justice agencies

Managers should keep staff up to date on the youth offending team's (YOT) performance in the swift administration of justice, the national/local targets, any changes to the definition of offender status and new advice on effective practice.	▪ Communications from managers to staff about:
	    o performance against targets for swift administration of justice
	    o guidance on changes to offender status
	    o any new recommendations on effective practice.

Service Delivery	
YOTs should ensure that young people appear at court on time.	▪ Agreements with the police to ensure YOTs are informed promptly of charges and detentions overnight ▪ Procedure for communicating with the CPS before first hearing about bail recommendations ▪ File records show that bail assessments have been carried out at first hearing and that *ASSET* forms were filled in at that time ▪ Operational guidance notes on the different sorts of bail supervision and support available, relating to ensuring

Key Indicators of Quality	Examples of Evidence to Consider
	defendants appear at court
	▪ Examples of when the recommended bail supervision and support methods have been used to ensure attendance
	▪ Court listings and secure establishment files showing that defendants were produced on time for hearings/trials
YOTs should ensure that the production of reports does not result in unnecessary delays.	▪ Agreements with police and CPS about ensuring YOTs receive advance information at the same time as it is supplied to the CPS
	▪ Agreements with the courts about YOTs being informed of youth hearings at the earliest opportunity
	▪ Correspondence or agreements with the courts about ensuring that PSRs are only requested when necessary
	▪ Plans for maximising the use of verbal advice or stand-down reports
	▪ Data on the proportion of occasions where the YOT officer in court was able to advise on sentence when a guilty plea was made at first hearing
	▪ Data on the proportion of PSRs for youths and PYOs that have been produced within the recommended time limits
Training	
Practitioners, volunteers and contractors should have information available to them on the specific protocols and processes that have been adopted by the area in response to the drive for the swifter administration of justice.	▪ Information available to practitioners about local protocols
	▪ Availability of *Key Elements of Effective Practice* guide
	▪ Operational guidance on local procedures to be used for swift administration of justice
Managers should ensure that the Learning and Development Strategy takes full account of the actions needed for the swift administration of justice.	▪ Analysis of training needs in relation to swift administration of justice
	▪ Commitment to meet those needs in the learning strategy
	▪ Links between effective practice and staff appraisals
Management	
Managers of youth justice services should ensure that there is a clear strategy for the delivery of key elements of the swift administration of justice.	▪ Existence of local youth justice service agreements and local timeliness protocols
	▪ Communication from managers to police/CPS/magistrates' courts/crown courts/the Probation Service about the recommendations in the *Key Elements of Effective Practice* guide (in particular, paragraph 2.4)
	▪ Process for reviewing protocols and agreements
The YOT should participate in and support the development of cross-agency agreements with regard to the swift administration of justice.	▪ Plan for implementation of the recommendations in the *Key Elements of Effective Practice* guide, in terms of communication, internal procedures and external agreements

Key Indicators of Quality	Examples of Evidence to Consider
Service Development	
Managers should regularly review internal processes to see if there is scope for streamlining and enhancing them.	- Minutes of strategic partnership meetings where agreements have been made about the delivery of the swift administration of justice - Action taken by strategic partnerships to ensure that PYO targets are being met - Process by which strategic partnerships review the procedures currently in place, with a view to reducing delays
Strategic partnerships should ensure that the Persistent Young Offender Pledge, the *National Standards for Youth Justice* and Youth Justice Board targets in relation to the speed with which the youth justice system operates are being met by the YOT.	- Arrangements for managers to regularly review YOT practices to ensure they enable the swift administration of justice - Description of the current process for producing PSRs with details of why this is the best possible method for the efficient production of reports or plans for process-improvement
Monitoring and Evaluation	
Managers should ensure that the swift administration of justice is monitored and evaluated in YOT, secure establishment, Intensive Supervision and Surveillance Programme (ISSP) and bail supervision and support work.	- Process for monitoring and evaluation of effective practice for bail supervision and support - Communications from managers in relation to monitoring swift administration of justice targets to staff dealing with bail supervision and support - Feedback to staff based on analysis of monitoring data on bail supervision and support - Actions being taken to address existing procedure based on the results of evaluation
The time taken between pre-sentence report (PSR) requests, completions and the supply of PSRs to court should be regularly monitored to ensure that the *National Standards for Youth Justice* are being met.	- Details of what staff monitor with regard to the timeliness of PSR production - Performance data on the time taken between PSR requests, completions and the supply of PSRs to court over time

Young People Who Sexually Abuse

Key Indicators of Quality	Examples of Evidence to Consider
Assessment	
This area of work involves both the child protection and criminal justice arenas. Consequently, multi-agency working is vital.	▪ Contributions to the assessment process from other agencies, e.g. education and health, are on file ▪ Documentation of assessment process shows consideration of links with family, input from victim and community networks
Regular reviews should be completed every quarter and assessment should be an ongoing process.	File records show that: ▪ initial and subsequent assessments are completed within *National Standards for Youth Justice* requirements ▪ prior assessments are available ▪ assessments are revised where a significant event has occurred (e.g. death or move to residential setting) ▪ risk management and relapse prevention are addressed
Individual Needs	

It is impossible to work with a young person without reference to their culture, gender, sexuality, level of emotional maturity and educational ability.	▪ Documented range of programmes accessible to staff
	▪ Aims and objectives of programmes link to developmental and intellectual needs.
	▪ Elements of programmes focus on:
	  o social skills
	  o thinking and behaviour
	  o response to cultural aspects
	  o equality and anti-discriminatory practice
	▪ Relevant assessment information identifying individual needs is available to those delivering interventions

Staff should consider how their 'tools' and interventions meet the needs of minority groups and make any necessary modifications.	▪ Relevant learning materials are available to respond to a range of developmental and intellectual needs for example disability, sensory impairment, languages other than English ▪ Files record use of appropriate learning materials for minority groups ▪ Development of programmes and supporting processes is informed by feedback and/or information taken from monitoring data
Communication	
There should be strong links and a shared understanding between the various parties working with a young person.	▪ Communication between responsible case holder and other officers on programme input and delivery ▪ Procedures in place for referring young people to other agencies and records of actual referrals ▪ Protocols in place for sharing information with other agencies and records of transmission of information
The assessment report should be considered at a meeting involving all the agencies involved.	▪ Minutes of multi-agency meetings to consider cases ▪ Feedback about young person's progress from other agencies to responsible case holder

Key Elements of Effective Practice: Quality Assurance Framework

Key Indicators of Quality	Examples of Evidence to Consider
Service Delivery	
Interventions should be delivered in a safe environment with clearly set ground rules.	• Practice guidance on security procedures and precautions to be taken by staff is available and up to date • Evidence of communication between the young person and the programme facilitator of what to expect • Materials/methods used to explain ground rules to young people • Action taken for non-compliance
When specialist agencies are used, youth offending team (YOT) or secure estate staff should be kept fully informed on the young person's progress and be involved in decision making.	• Feedback about young person's progress from other agencies to responsible case holder • Consultation with responsible case holder prior to decisions • Written records of decision making
Training	
Staff should be appropriately trained so they are able to address both current and emerging needs.	• There is training to an approved standard prior to staff under taking assessments • Staff appraisal systems regularly evaluate staff need for additional training • Procedures for staff support, supervision and development
Staff involved in direct intervention need more specialist training, so they can recognise risk factors through assessment and identify appropriate treatment intervention.	• There is training to an approved standard prior to staff delivering programmes with additional 'specialist' aspects • Links between training and application • Systems in place for monitoring quality of programme delivery • Practice guidance is available and up to date • Anti-discriminatory service delivery is captured in training and supervision arrangements
Management	
Staff should be properly briefed about the job, the impact it might have on them and where to go for support.	• Records of briefing sessions for staff (frequency and content) • Regular internal support meetings • Records of staff absence • Contingency arrangements for staff absence
There should be a structured support system for staff to discuss intervention content and for personal support when dealing with difficult issues.	• Structured support systems are in place and accessible • Support structures have clear aims and objectives • Procedures are in place to access external support networks if required
Service Development	
A local protocol is developed that incorporates both child protection, intervention and risk management.	• Signed protocol or other agreements with relevant agencies • Protocol content addresses child protection aspects, intervention and risk management • Services delivered by other agencies in line with the protocol • Arrangements for regular review and update of the protocol to reflect current status
Consultation with specialist agencies will provide advice on	• Records of input from specialist services • Service level agreements in place with specialist service

Key Elements of Effective Practice: Quality Assurance Framework

Key Indicators of Quality	Examples of Evidence to Consider
intervention delivery and design.	providers
	• Service level agreements with service providers cover:
	o quality standards
	o case and risk management guidelines
	o information sharing and confidentiality
Monitoring and Evaluation	
Actual interventions must be monitored to ensure that they are being delivered effectively.	• Systems to record assessment, programme delivery and completion in individual cases
	• Systems in place to aggregate and analyse data on programme delivery and completion
	• Output of analysis of monitoring data
	• Feedback to staff on effectiveness of delivery
The impact of interventions should be monitored.	• Systematic post-programme evaluation in individual cases
	• Use of YJB annual recidivism cohort
	• Improved effectiveness of programme delivery over time

Appendix B: Ratings Guidance

Notes for auditors, for assessing evidence and choosing ratings, on the following *Key Elements of Effective Practice* can be downloaded from the YJB website at www.yjb.gov.uk/practitionersportal/practiceandperformance/effectivepractice/qualityassuranceframework.

- Assessment, planning interventions and supervision

- Education, training and employment

- Final Warning

- Mental health

- Parenting

- Remand management

- Resettlement

- Substance misuse

Appendix C: Progress review template

EPQA Improvement Plan: Progress Report

Service Name:

Effective Practice Theme:

Date of update: _____ / _____ / _____

Please provide an update against each of the actions in your improvement plan, with a brief outline of progress made. In the Direction of Travel box please place an up arrow (↑) for progress side arrow for no progress (←→) and down arrow (↓) for backwards movement.

Area of improvement	Improvement action	Owner of action	Deadline	Progress made (or reasons if none)	Direction of travel

Area of improvement	Improvement action	Owner of action	Deadline	Progress made (or reasons if none)	Direction of travel