ICM
PRACTICE GUIDANCE MANUAL
2007

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ICM ENHANCED PROCESS FLOW CHART

Roles Involved		Page reference numbers
Links/ residential officers Service providers	Core Screen	13-19 and 70-77
PBSW	Prisoner interview (7 days)	20
PBSW	Prison notifies LA (14 days)	12
CBSW	LA appoints supervising officer (21 days)	12 and 20
PBSW CBSW	All available information transferred to & from LA (28 days)	11-12 and 20
CBSW	conduct family visit (6 weeks)	22
Case Co-ordinator PBSW CBSW Service providers	Initial Risk & Needs assessment (3-5 mths)	23-50 and 78-82
CBSW PBSW Case Co-ordinator Service providers Personal Officer	Initial Case Conference (no later than 6 mths from sentence)	51-63 and 87-96
Case Co-ordinator	Update CIP Action plan	64
Service providers Case Co-ordinators Personal officers (monitor)	Sequenced interventions	53-55
CBSW	CBSW annual family visit	22
As at Initial	Annual Risk & needs progress review	51-63 and 78-82
As at Initial	Annual Case Conference	51-63 and 87-96
As at Initial	Pre release progress summary	50
As at Initial	Pre release Case Conference	51-63 and 87-96

The colour key indicates the various stages of the process, as follows:

Initial Stages	Ongoing throughout	On an annual basis	Pre-Release

ICM STANDARD PROCESS FLOW CHART

Roles Involved		Page reference numbers
Links/ residential officers Service providers	Core Screen	13-19 and 70-77
Service providers	Referrals via PR2 to specialist providers?	8,13
Service providers	Providers assess and update the CIP with referrals and actions	8,13
Links/ residential officers Service providers	Action planning continued by service provider with administrative overview by Links staff	8,13
Links/ residential officers	CIP review by Links staff 6 monthly/ 4 weeks prior to release	8,13

The colour key indicates the various stages of the process, as follows:

Initial Stages	Ongoing throughout	Pre-Release

INTRODUCTION

1.2 Background to Integrated Case Management (ICM)

1.2.1 In early 2005, the Scottish Prison Service (SPS) instigated a wide-ranging review of its sentence management processes for all prisoners. The aim of this review was to examine how well the existing SPS' processes would fit with the future requirements inherent in the Management of Offenders Etc. (Scotland) Act 2005 (henceforth referred to as The Act) and the Ministerial expectations therein.[1] At the same time, it was recognised that The Act would impact on the Enhanced Throughcare Strategy and the requirements of Circular 12/2002[2].

1.2.2 At the time of the review it was recognised that there were many commonalities in the sentence management and Circular 12/2002 processes. Each appeared to be operating with very similar intentions, especially in relation to the assessment of risk/need and the planning of interventions to address and minimise these. However each system appeared to be working in isolation, suggesting a duplication of time, effort and resources. The sentence management system had been commented on in several of Her Majesty's Inspectorate of Prisons for Scotland reports for not being properly applied across the SPS estate. In addition, the audits conducted as part of the ICM project's development indicated large gaps in the action-planning component of the sentence management process. Significantly, this appeared to show that offenders' access to interventions was being negatively affected. There were also problems in relation to Circular 12/2002. Anecdotal evidence strongly suggested that local authorities were not implementing the process as fully or as successfully as was intended. There were pockets of good practice but these were few. This picture of patchy service development was later borne out in the results of the Phase 1 Audit that was carried out by local authorities at the request of the Throughcare Implementation Sub Group in late 2005. [3]

1.2.3 SPS set up a Project Board to oversee the strategic development of the new ICM process. Recognising that if ICM were to be successful (i.e. meet the needs of all those involved in the two key processes) there would be a need for close co-operation with other agencies, SPS invited representatives from the Association of Directors of Social Work (ADSW), the Police and the Voluntary Sector onto the Project Board in addition to its own personnel, which included a Senior Governor.[4] Below this Project Board, an ICM Advisory Group was set up. It was made responsible for monitoring and taking forward practical issues arising out of the work of many other smaller ICM sub groups. These sub groups were, in effect, working groups. They had been given the job of (1) considering specific parts of the sentence management and Circular 12/2002 processes and (2) finding ways by which a new unified ICM process could improve upon the particular task to be completed.[5] One noteworthy example of such a sub group is the multi-agency ICM Social Care Group. This sub group is worth mentioning because it has been instrumental in looking at the social work processes that are integral to successful implementation of ICM. In addition, an implementation team was set up with representation from all establishments at unit manager level. This group was specifically tasked to ensure the operational implementation of ICM and feedback on any issues that might impact on the project's success.

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1. The Management of Offenders Act places a responsibility on Local Authorities, the Scottish Prison Service and the Police – and in other statutory partners such as Health and Housing – to jointly establish arrangements for the management of offenders. Appropriate (cross-agency) information sharing, good communication and robust risk assessment and management processes are all vital components in securing the aims of The Act. More information is given on the aims and objectives of The Act on page 6.

2. More information on Circular 12/2002 is available on the Scottish Executive website at http://www.scotland.gov.uk/publications/2004/07/19605/39872

3. The Throughcare Implementation Sub Group was a sub group of Tripartite Group, the latter being a multi-agency strategic body responsible for the planning of throughcare service provision. Data pertaining to the Phase 1 Audit is available from the Scottish Executive Community Justice Services Division.

4. There was similar cross-agency representation on the Advisory Group and on certain sub groups.

5. There were 5 sub groups in total looking at a number of specific work packages.

1.3 Aims of ICM

1.3.1 Integrated Case Management is a multi agency approach that is focused on reducing re-offending by ensuring, where possible, risks are identified and a plan is in place for each prisoner to reduce those risks in a sequenced and co-ordinated manner.

1.3.2 Integrated Case Management seeks to keep the positive features of Sentence Management, whilst ensuring that there are strong joint operational processes in place with other criminal justice partners. Importantly, Integrated Case Management seeks to unite the Sentence Management process with the requirements of Circular 12/2002 for those prisoners subject to statutory supervision in the community. The aim of ICM is not solely about SPS having an efficient process in place which helps manage a prisoner's progression through custody. ICM is also aimed at establishing an effective system which facilitates closer co-operation and joint working practices between criminal justice agencies, in particular with criminal justice social work, but also on occasion with the Police and other community based agencies. The purpose of this is to improve the risk assessment and risk management processes, thereby reducing reoffending. The ICM process will fit directly with other recent developments including the Multi Agency Public Protection Arrangements (MAPPA) and Order(s) for Lifelong Restriction (OLR) to ensure the transition of high-risk individuals into the community is consistently managed.

1.4 ICM Practice Guidance/Manual

1.4.1 In order to help staff understand the ICM process and its inherent requirements, this new practice guidance/manual has been produced. The guidance has been deliberately designed to meet the needs of all staff involved in the process, though clearly much of the focus is on SPS and CJSW staff.

1.4.2 The guidance has been produced as one document. At one level this is symbolic of the new integrated unified approach to service delivery heralded by The Act. But more importantly, by producing the guidance as one document it is hoped that all staff involved in

the ICM process will see it in its totality and understand the key role that they and others play within that process.

1.5 Key Aspects of ICM

1.5.1 Integrated Case Management operates a two-tiered system: **standard and enhanced.**

1.5.2 Standard ICM is for all prisoners not subject to post-release supervision (mainly short-term prisoners). This process is delivered primarily by specialist providers who will assess and action plan within their area of expertise, but consistently updating the Community Integration Plan (CIP) as the main prisoner file. Prison Link Centre or residential staff will provide the administrative overview to ensure effective application of the Standard ICM process.

1.5.3 Enhanced ICM is for all prisoners who are subject to post release statutory supervision. This process utilises full risk and needs assessment and a Case Conference model for action planning.   This approach brings together the prisoner, key internal and external staff, and where appropriate the family, to examine the prisoner's progress through custody. The Case Conference will also examine the prisoner's assessed risk of reoffending and risk of harm. The Case Conference will decide on appropriate interventions which are aimed at reducing those risks post release. This particular approach should prove useful in (a) keeping the prisoner at the centre of the ICM process, (b) maintaining a focus on issues which are external to the prison as well as internal, (c) the sharing of relevant information across agencies and (d) assessing and managing risk. All of the above will be explained in more detail later in the manual.

1.5.4 It is important to make explicit at this point the key features of the Integrated Case Management process. ICM will:

• Be delivered to all convicted prisoners and not just those sentenced to 4 years or more, as was the case with Sentence Management;
• Differ in intensity according to risk and not, as previously, sentence length;
• Adopt a Case Conference approach to action planning and reviewing progress. This will involve all the relevant service providers who have contact with prisoners subject to post-release supervision;
• Utilise the input of all service providers through an IT-based system – SPS' PR2 system that will become the standard case management tool for most prison based staff;
• Have the same entry and exit procedures for all prisoners regardless of sentence length. All prisoners will undergo a Core Screen interview on entry to prison and will leave with a Community Integration Plan. The term Community Integration Plan is a standard term. The Community Integration Plan is a document which includes an assessment of risk/need and interventions/actions which are necessary to address both of these. It will also identify who/which organisation is responsible for undertaking particular tasks. It contains historical and current information;
• Provide prisoners with a clear pathway through custody. This should encourage greater engagement with the action planning process, a more responsible approach to addressing difficulties and therefore desistance from offending on release;
• Sequence interventions appropriately;
• Ensure all relevant information is shared with appropriate service providers to facilitate a holistic planning process;
• Facilitate fully integrated service provision (e.g. addictions, learning skills & employability and social care) using assessment tools that have been adapted to fit the IT-based case management system; and
• Provide a greater recognition of the diversity within the prisoner population.

1.5.5 Briefly highlighted below are the key roles for those involved in the ICM process (see Annexe E for further detail):

• SPS Link or residential officers are responsible for Core Screen Interviews that are completed within 72 hours of admission to custody;
• SPS Case Co-ordinators and Prison Based Social Work are responsible for organising and chairing Case Conferences and contributing to these;
• Prison Based Social Work are effectively the link with Community Based Social Work colleagues in ensuring good communication and information exchange;
• Service Providers will be expected to provide enhanced assessments (i.e. specific and thorough assessments) and direct service provision;
• Psychological staff will have the same role as other service providers, though additionally they will be expected to provide training on Motivational Interviewing Skills to Personal Officers and training to Case Co-ordinators;
• Personal Officers will have a role to play in helping motivate the prisoner to engage with service providers, keeping track of the agreed plan/outcomes and supporting the prisoner; and
• Community Based Social Work will be expected to attend and contribute to the Case Conferences and be the link with the family, community based services and the prison. Clearly, Community Based Social Work's role continues after the prisoner's release from custody, whereupon they will be required to supervise the individuals' licence/order.

1.6 The Management of Offenders Etc. (Scotland) Act 2005

1.6.1 The Management of Offenders Etc. (Scotland) Act contains several sections that provide a platform for the development of the multi-agency approach on which the Integrated Case Management process is based.

1.6.2 The Act established new Community Justice Authorities (CJAs), which came into existence (in shadow form) in April 2006 and which took up their full set of functions and powers in April 2007. The CJAs will produce area plans and co-ordinate and monitor the delivery of criminal justice services by local authorities and by the Scottish Prison Service.

1.6.3 Section 1 of the Act prescribes a duty to co-operate – including information sharing – for the CJAs, Scottish Ministers (i.e. SPS) and local authorities.[6]

1.6.4 Sections 10 and 11 of the Act will improve the way in which high-risk offenders are managed in prison and in the community. They provide local authorities, the Police, and the Scottish Prison Service (referred to as the "responsible authorities" in the Act) with a function to jointly establish arrangements for the assessment and management of the risk posed by sex offenders, violent offenders and those about whom the authorities are concerned by virtue of their conviction. Additionally, the Health Service will be a responsible authority for mentally disordered offenders who are also sex offenders or violent offenders. Separate guidance on these arrangements - i.e. the Multi Agency Public Protection Arrangements (MAPPA) - was issued by the Scottish Executive Justice Department's Community Justice Services Division on 2 October 2006 and a revised version was issued on 13 March 2007: Circular No. JD 15/2006 [7]. The links with the ICM process for relevant prisoners has been made clear in this guidance.

1.6.5 Sections 10 and 11 of the Act also provide for the responsible authorities to act in co-operation with other agencies in managing sexual and violent offenders. Equally, there is an obligation on those agencies to act in co-operation with the responsible authorities in managing sexual and violent offenders. (Examples of the type of agencies involved are education services, employment agencies, housing providers and the voluntary sector).

1.6.6 Taken together these initiatives will lead to a significant change in the way offenders are managed, with the overall aim of reducing reoffending. These reforms build on the expertise and experience of the professionals at the front line of criminal justice services. They should also be seen as positive developments within the context of the National Strategy for the Management of Offenders[8].

1.7 ICM and Criminal Justice Social Work

1.7.1 The Integrated Case Management (enhanced) arrangements bring together the strengths of two previously separate processes: SPS' sentence management and Circular 12/2002. ICM also builds on the criminal justice social work principles and practice guidance outlined in National Objectives and Standards for Throughcare; Circular 14/1998; and Circular 19/2005 [9]. Particular attention is drawn to the following key aspects of the standards/circulars:

- the designation of both the supervising authority and a supervising officer **from the point of sentence**;
- an enhanced role for the supervising officer **throughout the sentence** including prison visits, family contact work, an increased emphasis on co-ordination and case management; and
- greater importance attached to **appropriate information sharing, joint assessment between the relevant authorities and planning for release.**

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6. The Management of Offenders Etc. (Scotland) Act 2005 can be found at www.opsi.gov.uk/legislation/scotland/acts2005/20050014.htm

7. More information on Circular No.JD 15.2006 is available on the Scottish Executive website at www.scotland.gov.uk/topics/justice/jdcirculars/listjdcirculars

8. The National Strategy is available on the Scottish Executive website at www.scotland.gov.uk/publications/2006/05/19094327/0

9. More information on these is available from the Scottish Executive Community Justice Services Division.

1.7.2 This ICM guidance sets out a clear joint process map for both SPS and CJSW staff, specifically in relation to the roles/responsibilities/actions that need to be undertaken whilst the prisoner is in custody. This guidance does not cover the roles/responsibilities/actions that require to be carried out post release, for those prisoners subject to statutory supervision.

1.7.3 This guidance therefore supersedes Circular 12/2002. It does so, because the key components within Circular 12/2002 have been incorporated into the ICM guidance. Circular 14/1998 (guidance relating to extended sentences) and Circular 19/2005 (guidance relating to sex offenders sentenced to periods of custody between 6 months and less than 4 years) have both a custody and a community practice aspect to them. The ICM process replaces the timescales for contact with prisoners during the custodial part of their sentence within these circulars.

1.7.4 However, this ICM guidance does not alter the Throughcare Standards relating to the community based supervision. Nor does this guidance alter the community based responsibilities for post release supervision outlined in Circular 14/1998 in relation to Extended Sentence Orders. Equally, although this ICM guidance covers the process for (1) short term sex offenders subject to statutory supervision and (2) home leave, reference should continue to be made to the practice advice contained in Circular 19/2005 and Circular 1/2007(see footnote 5.1) relating to Home Leave. With respect to Circular 19/2005, it is important to note that the ICM process applies. Clearly in many cases it will require all relevant agencies to act quickly and properly given the potentially tight timescales involved. In practice, this may mean going straight to Case Conference as soon as possible after admission.

1.7.5 It should also be noted that the ICM process has not altered the procedures and practice outlined in Circular No. SEJD 18/2003, Protecting Children: Guidance on the Imprisonment and Preparation for Release of Schedule 1 Prisoners.

1.7.6 Staff should continue to follow the guidance given in Circular No. SEJD 18/2003, though bear in mind that the risk assessment, planning, risk management and notification tasks now have to be co-ordinated with other agencies as part of the ICM process.
Integrated Case Management arrangements will apply to all prisoners (both short and long term inmates) who are serving custodial sentences within Scottish penal establishments. It is envisaged that criminal justice social work will mainly become involved in the ICM process in cases where:

1. the prisoner will be subject to statutory supervision on release from custody;
2. the prisoner requests a Throughcare Addiction Service;
3. the prisoner requests a voluntary throughcare service; or
4. there is no statutory reason for criminal justice social work involvement but the Scottish Prison Service request this because there are concerns for the person's welfare or because of concerns for public safety.

1.7.7 As stated above, the Act has placed new obligations on the responsible authorities - and a duty to co-operate between agencies in specific cases - to work more closely together in planning, delivering and managing services in order to reduce reoffending and promote public safety. From a practice perspective, criminal justice social work will be required to collaborate and co-operate with other agencies in:

• carrying out risk assessments;
• preparing robust joint plans for managing risk;
• delivering effective interventions;
• reviewing regularly the above plans, interventions and the progress made by offenders in remaining offence-free.

2. POST SENTENCE ACTIVITIES AND RESPONSIBILITIES

2.1 Social work staff at Court

2.1.1 Unless there are exceptional reasons to prevent it, offenders will be interviewed following sentence by social work staff at the courts. The importance of this interview is recognised in both the existing Throughcare National Standards (paragraphs 29-30) and in more detail in the National Standards for Social Enquiry Reports (paragraphs 8.5-8.6 & 8.11) and paragraph 403 for SROs. Offenders who are subject to post release supervision should be considered a priority for this service.[10] This has not been changed by the new ICM process.

2.1.2 The purpose of this interview is to:

- explain the sentence of the Court to the offender;
- check if there are any immediate issues – of a personal, social or familial nature – which need to be addressed;
- inform the offender of the availability of social work services in prison and what contact to expect;
- check whether there is any information that needs to be passed on to the Scottish Prison Service for public protection purposes or in order to allow it to provide better care for the offender.

2.1.3 Court social work staff should be alert to the possibility of self-harm, in the light of the information in the pre-sentence reports, when conducting the post-sentence interview and ensure that this information is passed on to appropriate community and prison social work staff. For more detailed procedures relating to the assessment of self-harm see paragraph 2.19 of the National Standards for Social Enquiry Reports and Associated Court Services.

2.1.4 Court social work staff should also pass on any other information gathered from the post-sentence interview, which may help SPS in providing better care for the offender or in terms of public protection. This latter aspect is clearly in line with the duty to co-operate requirements set out in Section 1 of the Management of Offenders Etc. (Scotland) Act 2005.

2.2 Clerk of the Court

2.2.1 The role of the Clerk of Court is as detailed in paragraphs 31 - 32 of the National Standards for Throughcare for long-term prisoners and paragraphs 375 - 377 for SROs. These have not been altered by the ICM process.

As soon as the Trial Judge's or Sheriff's report becomes available it should be sent by the Clerk of the Court to:

2.2.2 For Prisoners Receiving A Life Sentence –
The Scottish Executive Justice Department, Parole and Life Sentence Review Division (PLSRD), 2W.01,
St Andrew's House,
Regent Road, Edinburgh EH1 3DG
(in the case of those subject to a life sentence); or

2.2.3 For all other statutory supervision prisoners –
The Scottish Prison Service, Partnerships and Commissioning, Calton House, 5 Redheughs Rigg, Edinburgh, EH12 9HW (for all other prisoners).

Parole and Life Sentences Review Division (PLSRD) and SPS will ensure that the Governor of the receiving prison receives a copy of the report.

The information provided at this stage is essential to SPS and CJSW staff when developing comprehensive risk and needs assessments and in deciding on appropriate interventions. The information will also help staff when considering/ making decisions about the prisoner's progression through custody.

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10. It is worth noting that those individuals who are made subject to a Risk Assessment Order - under the Criminal Justice Scotland Act (2003) - are also considered a priority for this service. Separate guidance has been issued to court based social work staff on this issue. This is available at www.scotland.gov.uk/topics/justice/jdcirculars/listjdcirculars

3. ARRIVAL AT THE PRISON

3.1 Prison Governor

3.1.1 The National Standards for Throughcare (at paragraph 32) require the Governor to copy, on receipt from the Clerk of Court, all relevant information relating to all prisoners subject to statutory supervision on release, to the social work unit at the prison. Additionally specific requirements for the serving of SROs are detailed in paragraphs 376-377 of the National Standards.

3.1.2 The SPS has an electronic database called Prisoner Records 2 (PR2). This is an estate wide database on which the details of all prisoners are recorded. New screens have been developed in consultation with criminal justice social work to support the ICM process, in particular facilitating referrals to other service providers, the outcomes of same, action plans, Case Conference minutes etc. Prison based social work staff will have access to all these details and will be able to input data directly onto the system.

3.1.3 Furthermore, the Governor must ensure that the relevant local authority (i.e. the Supervising Authority) is notified of the following:

1. the full name, date of birth and last known address of the prisoner;
2. the court at which the prisoner appeared, the date of sentence, the offence(s) for which the prisoner was sentenced;
3. the length of sentence passed; and
4. the prison within which the prisoner is being held.

3.2 The Supervising Authority and the Appointment of a Supervising Officer

3.2.1 The Supervising Authority is that of ordinary residence of the offender. The **ordinary residence** of an offender has to be assessed according to the circumstances of that offender but is generally the place to which s/he has ties, either through family or because s/he has made her/his home there and lived in that area for some time. In cases where that is unclear or in dispute, the relevant authority shall be designated on reception by the Governor as that which carried out the Social Enquiry Report (SER) to which the sentence relates (where such a report was obtained prior to the custodial term being imposed). It is important to stress that the designation should be done in consultation with the relevant authority concerned. Where, in the course of pre-release planning it becomes clear that the prisoner will not be released to the designated supervising authority, it is for that authority to negotiate and agree any change in supervising authority with the other relevant local authority. The Governor may then change the designation.

3.2.2 Paragraph 380 of the National Standards for Throughcare states that it is for Scottish Ministers, on application from the person subject to the Supervised Release Order (SRO) or their supervising officer, to agree to any changes in the designation of the Supervising Authority. The procedures for changing the designation of the Supervising Authority, as laid down in National Standards, should therefore be followed for prisoners subject to an SRO.

3.2.3 The initial notification to the supervising local authority must be accompanied by a request to appoint a supervising officer to the prisoner's case. The notification, together with the request to assign a supervising officer, must be made by SPS within 14 days of receipt of the relevant information from court. The supervising officer must provide their details to the Prison Governor within 7 days and also provide a copy to the prison social work unit.

3.2.4 In practice, the Governor will generally discharge the above responsibilities through the social work unit in the prison.

4. CORE SCREEN GUIDANCE

4.1 The Core Screen process is the initial contact for all prisoners who will be involved in the Integrated Case Management system and operates in the same way, regardless of the prisoner's sentence length and post release supervision status. The information from Core Screen will provide the platform for specialist agencies to engage with the prisoner and plan activities via the Community Integration Plan (CIP) on PR2. For the prisoners who are subject to post release supervision the information obtained during the Core Screen interview will be a valuable starting point for the full risk & needs assessment.

4.1.2 The Core Screen interview will be carried out by an SPS officer and the data will be recorded on PR2. This section provides useful information to assist that process.

4.1.3 The purpose of the Core Screen is to identify any immediate needs as soon as possible in order to make the appropriate referrals to service providers and in order to have the best possible plan of action in place. This is especially important for the very short-term prisoners.

4.1.4 If during the Core Screen any actions/ referrals are identified then a referral should be made via the Community Integration Plan screen on PR2. This referral will be picked up by the relevant specialist provider who will assess and identify the appropriate action.

4.1.5 Any information obtained regarding outstanding charges, warrants or fines should be passed to the relevant personnel within the establishment.

4.2 Responsivity

4.2.1 Responsivity is designed to capture any issues that may impact on a person's ability to engage with particular interventions. Any one individual may have a number of responsivity issues, and these should all be recorded, even where there is uncertainty on the part of staff working with the prisoner. For example, there may be cultural issues, language difficulties or issues around sexual orientation or religious beliefs that should be considered when planning ongoing/future interventions. Disability may be a particularly common issue and special care should be taken to ensure that the impact of a disability is considered when developing the CIP. All information obtained here should be recorded on PR2 in the responsivity domain notes page in the CIP.

Core Screen Interview

Screen for needs associated with **Accommodation** → Need Identified? → Yes / No

Screen for needs associated with **Benefits and Finance** → Need Identified? → Yes / No

Screen for needs associated with **Family Contact** → Need Identified? → Yes / No

Screen for needs associated with **Resettlement** → Need Identified? → Yes / No

Screen for needs associated with **Employment** → Need Identified? → Yes / No

Screen for needs associated with **Learning & Skills** → Need Identified? → Yes / No

Screen for needs associated with **Substance Misuse** → Need Identified? → Yes / No

Screen for needs associated with **Offending Behaviour** → Need **& Motivation** Identified? → Yes / No

RETURN TO FLOW UNTIL ALL NEEDS CONSIDERED

Refer to Specialist through PR2

Review CIP Referrals

Referrals Actioned Within Agreed Timescales? → Yes / No

Contact Specialist

END

4.3 Social Care Needs domain

This domain focuses mainly on the practical issues of securing accommodation and ensuring that the correct benefits procedure are applied to maximise entitlements.

4.3.1 Accommodation Domain

Accommodation issues are important for many prisoners, but they may be vital for those prisoners who are of No Fixed Abode or returning to unstable accommodation on release, especially those who are serving very short sentences. It is critical to make the appropriate referral as soon as possible to allow the local authority accommodation provider to properly identify the correct form of action necessary.

Staff should be aware of local authority accommodation providers' contact details and attendance patterns within their establishment. Every effort should be made to link the prisoner with housing difficulties to the appropriate local authority housing provider as quickly as possible after admission to custody. In the absence of a prison based housing advice service provider, and as a last resort, homeless prisoners (or those of No Fixed Abode) should be advised to present themselves at their Local Housing Office on the day of liberation and be provided with information on local housing providers contact details. Local authorities have a statutory duty to assess homeless applications and, in appropriate cases, provide emergency accommodation for a period of 28 days (maximum).

Prisoners subject to the enhanced ICM process should have their accommodation situation reviewed at every Case Conference. If housing is a problem, then the local authority housing provider should be invited to attend. This ensures that suitable arrangements for accommodation for the prisoner post release are in place pre-release.

Staff should record all referrals from this section in the Social Care Needs domain within the CIP on PR2 by following the guidance in paragraph 3.

4.3.2 Benefits and Finance Domain

This section covers monetary benefits provided by the state to the prisoner. The purpose of this aspect is to ensure that any benefits that the prisoner was receiving prior to release are properly closed and that the process is initiated for reinstatement of benefits on release. There is also the opportunity to identify any debt management issues/outstanding fines that the prisoner may have and ensure that information and advice is available if required. Benefits and finance issues are very real concerns for prisoners. If not properly addressed, prisoners can accrue large debts whilst in custody.

Benefits: Issues with benefits should be handled by JobCentre Plus. Staff should be aware of their attendance patterns within their establishment. Where the prisoner identifies difficulties with these issues, staff should make a referral to/ assist the prisoner in making contact with Job Centre Plus staff.

Debt/Finance Issues: Local service providers (and their attendance patterns) should be known to staff. The local Citizens' Advice Bureau will offer information and advice on debt management/benefit queries in the absence of the local service provider.

Staff should record all referrals from this section in the Social Care Needs domain within the CIP on PR2 by following the guidance in paragraph 3.

4.4 Resettlement Needs domain

Family contact during prison and on release
Within this area it is important to establish the support that the offender is able to access from family members during the prison sentence and post release. Assessing the level of family support will help the prisoner see that they have a "connection" back to their community and a life beyond the prison walls. Equally, identifying the family support on offer will help establish which family members the prisoner may wish to involve in Case Conferences; though this applies primarily to those who are subject to statutory supervision. It is the responsibility of all staff within the prison to ensure that the level of contact is maintained to the highest possible standard. The following are areas which staff should cover/check as part of the discussion with the prisoner on this issue:

- **Unstable/problematic relationships.** Staff should consider: the extent of the problems; will this situation impact on the prisoner's stability in prison, e.g. will visits be affected?
- **Childcare Issues.** Particular consideration should be given to issues such as: access to children; children visiting the prison; attendance/progress at school; and the basic care, health and wellbeing of children during the prisoner's period in custody.
- **Access to Children.** A Social Work referral should be completed in all cases. This is particularly important in situations where there are children in residential care and those where access is restricted by a court order.
- **Difficulties for Visitors.** Information may be needed on: visiting times; directions; conditions; items allowed in the prison; financial assistance etc. If so, issue local information leaflet and/or assisted prison visits booklet. Information may be required in a language other than English.

- **Disabled Visitors.** Contact should be made prior to visit to ascertain nature of disability and allow reasonable adjustments to be made. Visits/Gate staff & Disability Liaison Officer should be notified.
- **Concern over family contact**. Staff should consider exploring the current relationship between the prisoner and family/friends, encouraging the prisoner to identify any problem issues/concerns.

Note: Access to a telephone may often help the prisoner address immediate concerns; judgement should be used to ascertain when this is an appropriate course of action.

Record all referrals from this section in the Resettlement needs domain within the CIP on PR2 by following the guidance in paragraph 3.

4.5 Resettlement supports

This section focuses on ensuring that the offender has appropriate supports within the community on release. This is inclusive of all statutory supervision cases where Prison Based Social Work will continue with the ICM process toward full Risk & Needs assessment and Case Conferencing.

Statutory Supervision: The prisoner must be referred to Prison-Based Social Work if he/she is/has been:
- convicted of a Schedule 1 offence (i.e offences against a child)
- subject to Sex Offender registration
- Sex offender sentenced to 6 months or more
- sentenced to four years or more
- sentenced to Life
- subject to an Extended Sentence
- subject to a Supervised Release Order
- subject to an Order(s) for Lifelong Restriction

Issues for Social Worker: If a prisoner wishes to speak to a Social Worker regarding issues such as: housing; debt; finance; benefits; employment or accessing a solicitor, the referral should be passed - in the first instance - to the relevant agency/ provider rather than prison-based Social Work.

Referrals to prison-based Social Work should be relevant and appropriate.

- **Access to Voluntary Throughcare:** All convicted prisoners are entitled to request Voluntary Throughcare - such requests should be passed to prison-based Social Work.
- **Chaplaincy Support:** Chaplains meet with people to listen to any matter they may wish to talk about, whether religious or not.
- **Community Supports:** If a prisoner requests support from a community/voluntary agency, the interviewing officer should identify the appropriate route and complete a (direct) referral.

Record all referrals from this section in the Resettlement needs domain within the CIP on PR2 by following the guidance in paragraph 3.

4.6 Learning, Skills and Employability domain

4.6.1 Employment
The establishment may have other service providers in addition to JobCentre Plus. Staff should be aware of local arrangements for access to such providers.

All convicted prisoners should be made aware of the requirement to disclose their conviction to potential employers. Staff should, therefore, encourage prisoners to speak with the local service provider to obtain advice on disclosure.

The prisoner's skills/qualifications should be discussed in order to highlight potential work/ training opportunities while in prison.

Record all referrals from this section in the Learning, Skills & Employability domain within the CIP on PR2 by following the guidance in paragraph 3.

4.6.2 Learning & Skills
Staff should be aware of the range of opportunities available from Learning & Skills service providers and be able to pass relevant information to the prisoner both on request and as a way of encouraging engagement.

- The opportunities for continuing learning/ skills/training in which the prisoner is engaged should be highlighted.
- Staff should employ an open-questioning technique as potential for learning may not be readily identified, particularly where prisoners are reluctant to disclose lack of basic skills.

Record all referrals from this section in the Learning, Skills & Employability needs domain within the CIP on PR2 by following the guidance in paragraph 3.

4.7 Substance Misuse domain

Many prisoners will be reluctant to admit they have a problem with drugs, alcohol or solvents. Indeed, they may be unaware of the fact that they have a substance misuse problem. Sensitive, open questioning is therefore essential.
If the prisoner does not feel he/she has an addiction problem, ask if drugs, alcohol or solvent abuse was a factor in his/her offence. Sensitive follow-up questions/discussion will help identify whether or not a substance misuse problem exists.

If the prisoner answers 'Yes' to the questions included in this section, ask if he/she would like to meet with a caseworker to discuss substance misuse/addiction problems.

Remember: the prisoner should only be referred to Enhanced Addiction Casework Services if serving a sentence of 31 days or more in prison. It should also be remembered that appropriate referrals will flow from the Enhanced Addiction Casework Service provider to the community-based Throughcare Addiction Service (TAS). TAS aims to provide a continuity of care for those short-term prisoners with addiction difficulties post release, by linking them to appropriate community-based resources. Making sure that the Core Screen process identifies appropriate prisoners and refers them to EACS is therefore vitally important in ensuring that TAS is successful.

Record all referrals from this section in the Substance Misuse domain within the CIP on PR2 by following the guidance in paragraph 3.

Smoking Cessation referrals should be made to Enhanced Addiction Casework Services for prisoners serving at least 12 months. If the prisoner wishes help to cease smoking then the appropriate assessment and intervention will be offered.

4.8 Offending Behaviour domain

4.8.1 Constructs/ Cog Skills

Staff should screen for need in this area - it may be useful to prompt the prisoner using examples, such as stealing or dealing in drugs to obtain money, or using violence to deal with problems with others. Alternatively, refer to their current offence and ask them why they committed that offence, and explore to find out if it was to address a problem they were facing.

Staff should screen for motivation in this area - it is important to avoid implying that the prisoner is very poor at problem solving, rather focus on the programme developing existing skills and offering the prisoner greater choices in the future. The interviewer should have some knowledge of the Constructs programme in order to answer any questions the prisoner may ask at this stage. If they feel unable to answer all the queries, staff can give an information leaflet, suggest the prisoner asks questions at the induction session, or offer to refer them to the programmes department. It is important to emphasise that a referral does not automatically remove the prisoner's choice with regard to actually undertaking the programme.

If the prisoner's answers to these two questions indicate they have both need and motivation to do the programme, refer them to the programmes team. If they state they do not want to do the programme, this should be accepted. At this point, staff should offer them more time to think about it, along with more information about the programme in the form of a leaflet. If the prisoner is not on enhanced ICM, it should be emphasised to them that it is very possible they will not be approached again in the future and offered a place, and that it is now their responsibility to refer themselves if they decide they might find the programme useful. They should also be advised that there is usually a waiting list for the programme.

Record all referrals from this section in the Offending Behaviour needs domain within the CIP on PR2 by following the guidance in paragraph 3.

4.8.2 Anger Management

Staff should screen for need in this area - encourage the offender to focus on the build up to the offence and how they were feeling. Direct questioning can be used, for example, asking "At the time of the offence, do you remember feeling any strong emotions such as anger?". Another prompt question might be "when you've been violent in the past, what would you say has led you to act in this way?". For the individual to demonstrate potential need for anger management, there should be some indication that the offence was not planned, but rather resulted from them struggling to control their anger.

Staff should screen for motivation in this area - it is important to avoid implying that the prisoner is very poor at anger management, rather focus on the programme developing existing skills and offering the prisoner greater control in the future. The interviewer should have some knowledge of the Anger Management programme in order to answer any questions the prisoner may ask at this stage. If they feel unable to answer all the queries, they can give an information leaflet, suggest the prisoner asks questions at the induction session, or offer to refer them to the programmes department. It is important to emphasise that a referral does not automatically remove the prisoner's choice with regard to actually undertaking the programme.

If the prisoner's answers to these two questions indicate they have both need and motivation to do the programme, refer them to the programmes team. If they state they do not want to do the programme, this should be openly accepted. At this point, staff should offer them more time to think about it, along with more information about the programme in the form of a leaflet. If the prisoner is not on enhanced ICM, it should be emphasised to them that it is very possible they will not be approached again in the future and offered a place, and that it is now their responsibility to refer themselves if they decide they might find the programme useful. They should also be advised that there is usually a waiting list for the programme.

Record all referrals from this section in the Offending Behaviour needs domain within the CIP on PR2.

4.9 Additional Information

This section offers the opportunity to record more detailed information on the prisoner that should be transferred to the relevant domain notes page as detailed in paragraph 5.1.

If at any time during the Core Screen interview the prisoner gives cause for concern with their behaviour or responses that would lead to the conclusion that they may be at risk of self harm or suicide then commence the Act 2 Care process by providing an appropriate safe environment. This should also be discussed with your line manager.

4.10 Links Centre

The purpose of the Links Centre is to provide a physical setting where prisoners can be assisted with their re-integration back into their community and be 'linked' to a range of services and partners to assist with reintegration and resettlement. It should bring together a range of expertise and interventions to address key factors identified as associated with offending e.g. housing, employment, financial matters, family relationships and addictions. These centres are designed to ensure that the very short term prisoners needs are addressed as well as providing a consistent induction process for all prisoners, inclusive of the core screen.

It is anticipated 4 main types of activity would be undertaken in the Links Centre. These activities are divided into the following categories, which reflect the chronological stages of a prisoner's sentence:

- **Induction and Assessment**
- **Activities and Interventions**
- **Action Planning and Community Integration Planning**
- **Pre-release Activities**

5. SOCIAL WORK CONTACT WITH PRISONER AND FAMILY

5.1 Prison Based Social Work

5.1.1 All prisoners subject to statutory supervision on release must be interviewed by prison social work staff, shortly after their admission.   These interviews should take place within 7 days of receipt of the relevant information from the court.

The purpose of this interview is to:

1. establish whether there are any immediate problems of a personal or family nature to be dealt with;
2. discuss with the prisoner if they wish a family member to be involved in the ICM process and, if so, identify whom (it should be explained to the prisoner that this will be subject to approval by SPS and Social Work staff);
3. inform the prisoner of the social work services available in the prison and how to access these, together with an indication of what contact to expect from the unit staff and the community based supervising officer;
4. explain to the prisoner what the requirements of statutory supervision will mean for them. This should take into account the particular requirements of the licence or order to which the person will be subject;
5. inform the prisoner of the parole process, where applicable. This also includes explaining to the prisoner that they will be subject to statutory supervision post-release even if they are not released early on parole; and
6. for Schedule 1 offenders, this interview must also combine the purposes outlined at paragraph 324 of Throughcare National Standards and SEJD Circular 18/2003.

5.1.2 Once the prison based social work unit have been notified of the supervising officer's details, they should ensure that the supervising officer has copies of the relevant information.   That information should include amongst other things:

• the indictment;
• the previous convictions libeled in court; and
• the social enquiry report, psychologist/ psychiatric and medical reports etc.

If the supervising officer does not have any of the above, then prison based social work should share this information with them within 7 days. Equally, if the supervising officer has information about the prisoner (e.g. about previous periods of statutory supervision, contact with other local authority services, etc.) which may assist colleagues in managing the prisoner or in providing services to them then this should be shared with prison based colleagues within the same timescale. It is important to note that the information sharing process is a two-way process.

The Trial Judge's report is not usually available within the 28 day timescales. However, this will be forwarded to the supervising officer as soon as it becomes available. Further information should be shared between the supervising officer and prison based social work unit leading up to the Case Conference. This would include the sharing of the CIP prior to the Case Conference being held. Prison social work staff will also discuss with community social workers any work already undertaken with the prisoner in the community prior to sentence. This information should be used to assess whether continued work is necessary in custody (eg. around offending).

5.2 Community Based Social Work Involvement

5.2.1 National Standards for Throughcare state that effective throughcare for prisoners and their families requires contact to be established between the prospective client(s) and the local authority as soon as possible (paragraph 30). Supervising officers have an important early role to play in establishing that contact and sustaining productive links throughout the custodial term and thereafter during supervision in the community. Contact with the prisoner will, in the main, be focused around the ICM Case Conferences which are held initially within six months of the prisoner's admission to custody and annually thereafter. This constitutes the minimum expected level of contact between the supervising officer and the prisoner.   However, more frequent contact may be necessary in some cases. Decisions on the appropriateness of such visits may be influenced by a variety of factors: e.g. the attitude of the prisoner towards supervision and the expected difficulties in securing compliance; the overall length of sentence; the outcomes from prison based work or programmes; changes in the prisoner's personal or family circumstances; and demands on operational resources.

5.2.2 The purpose of the visit with the prisoner will vary depending on whether the supervising officer is attending an ICM Case Conference or carrying out a specific piece of separate work as described in the paragraph above. Generally, the purpose of the meetings will be related to the following types of tasks – information gathering/giving, assessment, planning, intervention, monitoring, review.   Where a planned ICM Case Conference visit cannot be made, the details for this should be logged in the community based casefile and countersigned by a line manager. The details should also be given to prison based social work colleagues to record on PR2 too.

The overall aims and objectives of the work of the supervising officer throughout the period of custody and after release are:

• the protection of the public from harm
• the prevention or reduction of further offending
• the rehabilitation and re-settlement of the offender

As stated earlier, the supervising officer is expected to notify the Prison Governor and the prison based social work department of their involvement within 7 days of receiving the request.

5.2.3 Family Visit

The initial visit to the prisoner should be preceded by a visit to the prisoner's family, other than where the SER or other information indicates that this would be inappropriate. This should take place within 6 weeks of the allocation of the case to the supervising officer. Where such a visit is judged to be inappropriate, the reasons for this must be recorded in the community based case record and countersigned by a line manager. The information should also be passed to prison based colleagues to be recorded on PR2.

The purpose of this initial family visit is for the supervising officer to:

- introduce him/herself, explaining his/her role;
- outline the nature and implications of the sentence and supervision;
- explain the ICM process and the possible nature of future contact (e.g. Home Leave, the preparation of Home Background Reports, pre-release planning etc);
- assess the impact on the family of, and their reaction to, the prison sentence; and
- extend an offer of appropriate assistance to the family in dealing with the consequences of the prison sentence (including access to housing or money advice, childcare supports, voluntary organisations and prison visiting assistance etc.)

5.2.4 The family visit is expected to take place annually, preceding each Case Conference.

The family visit allows the supervising officer the opportunity to keep up to date with the family situation and foster positive working relationships. Consequently, any Home Background Report on the prisoner, either for temporary leave or parole purposes, should be allocated to the supervising officer, unless there are exceptional circumstances which do not permit this to happen. The supervising officer will be best placed to carry out these tasks having built up a working relationship with the family members over a period of time. The information gained from this contact with family members will be included in the full Risk and Needs assessment and discussed at the Case Conference, unless there are specific reasons prohibiting this.

6. COMPILING THE RISK & NEEDS ASSESSMENT

6.1 OVERVIEW OF RISK

6.1.1 Background

6.1.2 Social Work

- In cases where a Social Enquiry Report is requested by the courts, Community Based Social Work will undertake a risk assessment as part of the report which helps determine which options are available to the court.
- Once in custody, Prison Based Social Work may complete a risk assessment to guide their work with the prisoner, and these assessments are likely to be repeated throughout the sentence in order to assess progress made by the prisoner. This is particularly the case with prisoners who are subject to statutory suspension.
- The type of risk assessment varies according to Local Authority, with some of the more common tools listed under Annexe B.
- These are two tools used as standard practice across Scotland in relation to sexual offenders: the Risk Matrix 2000 and the Stable and Acute 2007 risk assessment tools.

6.1.3 Psychology

1. In cases where a sexual offender has not already been subject to the RM2000 risk assessment by Social Work staff, psychology (or someone trained by psychology) will undertake this assessment.
2. Prior to starting a sexual offending treatment programme (STOP), an offender will also be assessed using Structured Assessment of Risk and Needs (SARN) in order to identify specific needs to be addressed on the programme.
3. Similarly, candidates for the Violence Prevention Programme (VPP) are assessed for risk of violent recidivism, using the Violence Risk Scale (VRS).
4. In some cases, Psychological Services may have completed a Psychological Risk Report for a prisoner, usually upon the request of the Risk Management Group. These reports are always based on the use of one of the tools listed under Annexe B.

6.1.4 Risk Management Authority

The recent establishment of the Risk Management Authority in Scotland will help establish good practice in relation to the assessment of high-risk offenders in the Criminal Justice System. The authority will disseminate best practice in risk assessment and risk management, as well as playing an active role in overseeing these procedures with certain high-risk offenders (i.e. those subject to OLRs). In their Risk Assessment Tools Evaluation Directory (RATED), the Risk Management Authority discuss the importance of using the tools listed under Annexe B appropriately, as well as the outcomes produced by them.

"In all cases, practitioners should have the necessary training for using the tool(s) of their choice, be aware of its limitations and the caveats in its use, and be in a position to discuss these, where relevant, with the court and to defend their assessment". (Page 7, RATED)

It may be that the following guidelines are updated in line with Risk Management Authority policies or recommendations in the future.

6.2 Transfer of risk assessment information to PR2

Risk is dynamic and can increase or decrease in response to changes in the prisoner's personal or social circumstances (e.g. increased motivation to stop offending, or altered social attitudes). For this reason, it is important to ensure risk assessment information is updated as and when it becomes available. Prisoners serving long term sentences will undergo a number of risk assessments during their sentence. Additionally, some prisoners may have assessments in their files from previous sentences.

6.2.1 New Risk Assessments (i.e. report available in electronic format)

Where the risk assessment is conducted by prison staff during the current period of custody, an electronic copy should be available, and this should be attached to the Risk & Reports page on PR2.

At the same time, the key information from the full report should be summarised on a Risk Assessment Sheet (Annexe C), which should also be attached to the Risk & Reports Page.

6.2.2 Previous Risk Assessments (i.e. report only available in hard copy on file)

There will be paper copies of risk assessments in the prisoner's file and, unless there are the facilities to scan the document, it will not be possible to access an electronic copy that can be attached directly to PR2. In this situation, if the risk assessment is actuarial (i.e. those asterisked under Annexe B) then the result should be transferred to the Risk Assessment Sheet. If in doubt, please contact Social Work or Psychology to check whether this would be appropriate.

6.2.3 Risk Assessment Sheet

The Risk Assessment Sheet is divided into two main parts. The first, is for recording information from actuarial risk assessments (i.e. those asterisked under Annexe B).

Therefore, the information to be recorded in this section includes:

1. The name of the tool, e.g. RM2000, OGRS etc. and the date completed
2. The name of the person who originally completed the assessment.
3. The result, e.g. for OGRS, this would be a percentage score reflecting likelihood of general reconviction, but some tools look at reoffending, or specific offence types, or risk of serious harm etc.
4. The timeframe, or period of time the tool applies to. For example, OGRS looks at the likelihood of reconviction over a two year period.
5. The semantic description, i.e. how the result would be commonly interpreted, e.g. low, medium, high

The second part is for recording information from tools that adopt a more in-depth structured clinical approach. These often have a greater focus on dynamic risk factors, i.e. those factors that can still be influenced in order to reduce risk.

Information recorded in this box includes:

1. Instrument used and date completed
2. The name of the person/people with the appropriate relevant training and knowledge to interpret the results for the Case Conference
3. A summary of those factors that were identified by the tool as contributing to the individual's level of risk
4. A brief outline of how these factors would interact in a high risk situation in terms of the individual offending
5. The types of offending behaviour the tool indicates the prisoner seems likely to engage in
6. A brief description of scenarios where this offending seems most likely, i.e. high risk situations, and scenarios likely to decrease the risk of offending.

6.2.4 If any assessment was undertaken prior to the date of the last offence, ensure this is highlighted.

Please contact the Social Work Department with any queries regarding LSI-R, LS/CMI or RAGF assessments. Queries regarding any other Risk Assessment Tools should be directed to the Psychology Department.

6.3 Recording Previous Convictions

Part of the Risk Assessment Process is the consideration of previous behaviour. Previous behaviour is the best single predictor of future behaviour for any individual. Annexe D comprises a sheet for the recording of previous convictions, as described below.

Information about previous convictions is most reliably obtained from the Scottish Criminal Records Office.

Staff are required to record the number of previous convictions across various types of offending, distinguishing between non-custodial, short-term custodial and long-term custodial sentences. The index offence(s) is not to be included as a previous conviction. It should be categorised separately at the top of the form.

If there is more than one index offence, the principal offence (i.e. that for which the prisoner received the most severe sentence) should be cited. This will not be an issue when there is only one current index offence, or when all current index offences fall into the same category of offence type.

It should be stressed that the number of court appearances that a prisoner has had does not always equate to the number of previous convictions. If an individual has 2 charges of the same offence at the one court appearance, they are counted as separate convictions.

The assessing officer is also required to record the age of the prisoner at first violent conviction (if applicable), age at first sexual conviction (crime of indecency) (if applicable), and age at first general conviction (any offences that do not fall into one of the other two categories).

In order to complete this section, it is necessary to classify each previous conviction as belonging to one of the categories provided. The categories used are the same as those used under Sentence Management, i.e. those used by the Statistical Branch at the Scotland Office as updated January 2002. Some types of conviction cannot easily be identified e.g. Police (Scotland) Act 1967. Here is an example to illustrate the point:

Police (Scotland) Act 1967, Section 41(1)(a) –
serious assault (violent offence); or
resisting arrest (other offence); or
petty assault (other offence)

If you find that a prisoner has a conviction that cannot be identified, you should not attribute this to a category but should record the full title of the statute and simply state what offence(s) it may represent (as above) in the free text space.

7 OVERVIEW OF NEEDS

7.1 Sources of Information

7.1.1 Sources of Information
When compiling a Provisional Risk & Needs assessment, information will be available from two main sources:

• file collateral, and
• direct entries from service providers on the CIP on PR2.

File collateral will be particularly important for the Initial Risk & Needs Assessment, though it should be ensured that information from documents that do not arrive in time for this assessment is added to PR2 as and when it becomes available and is utilised it at the next Risk & Needs Progress Review. There follows a brief description of some of the documents that comprise useful information regarding the needs of a prisoner.

7.1.2 Trial Judge Report
Provides detailed background information to the offence, the evidence led, alongside the Judge's conclusions and sentence imposed.

7.1.3 Social Enquiry Report (SER)
Courts are required to – and in some cases may wish to – request a Social Enquiry Report as part of the sentencing process. The SER provides detailed information on the offender's circumstances at the time of the offence and their attitude towards their criminal behaviour. The SER also provides a risk assessment on the likelihood of the person reoffending and causing harm to members of the public, as well as an analysis of what sentencing options are available and appropriate.

7.1.4 Risk Assessments
There are many different risk assessment tools, which can be completed on the basis of file information or interviews with the prisoner, or sometimes a combination of both. Specific tools are detailed further in the previous section (Guidelines for Risk). There may be more than one risk assessment on a prisoners' file and it is important that information from all the assessments found is transferred onto the individual's Community Integration Plan.

7.1.5 Core Screen
Screening tool conducted within the first 3 days of custody. Designed to gather information on basic needs via prisoner self-report, providing them with the opportunity to access the appropriate service providers, who will then assess their needs. (see pages 13-19).

7.1.6 Psychiatric and Psychological Reports
In a prisoner's file, there could be copies of Psychiatric and Psychological reports from any period of their life, whether in custody or in the community. Psychiatric reports have a medical basis, and tend to focus on mental illness whilst Psychological reports chiefly focus on the individuals thinking and behaviour.

Although they vary across the board, both types of report frequently provide detailed information on the offender's background, relationships and many other areas covered by ICM. Much of this information may be based on the prisoner's self-report, and where this is evident, this should be reflected when copying information on to PR2.

7.1.7 Hall Staff Reports
Hall Staff complete reports for the ICM process, as well as for applications for Parole, First Grant of Temporary Release etc. They frequently contain useful information about the prisoner's behaviour in the hall, which may differ from behaviour witnessed by staff in activities or on interventions. Relevant reports should be directly attached to the Risk & Reports Screen within the CIP on PR2.

7.1.8 Specialist Staff Reports
Whilst this list is not all-inclusive, examples of specialist reports include:

• Social Work Reports
• Regimes or activities reports (e.g. from workshops or work placements in the community)
• Lifer Liaison Officer reports
• Previous Parole Dossiers
• Post Programme Reports
• Learning Centre Records
• Healthcare Screening/Assessment

- Addictions Testing (formerly MDT) Reports (PR2)
- Addictions Case Management File
- Common Addictions Assessment Recording Tool (CAART) – Single Shared Assessment
- Throughcare Addictions Service Assessment
- Drug Treatment & Testing Orders
- Learning Plans & Records of Activity/ Achievement prepared by Learning Service Contractor
- Any assessments or reports on specific or global learning difficulties/disabilities

7.2 Use of Sources

As already stated, unlike previous systems, agencies that have made contact with the prisoner before the initial Risk & Needs assessment takes place will have entered information directly onto PR2. Therefore, it will not be necessary to contact these agencies for reports as they will be stored on the relevant domain on the Community Integration Plan. The staff conducting the Provisional Risk and Needs Assessment need only refer to documents outlined above that have not already been utilised.

The availability of the above types of report is likely to vary considerably from prisoner to prisoner.

The following section gives an indication of what information would usefully inform a Risk & Needs Assessment, along with an indication of likely sources of that information. It is unlikely that **all** the information listed will be found in each prisoner's files. Therefore, only the information available should be transferred to PR2. Where information cannot be found, it should be stated on PR2 that there is no evidence to answer the question one way or the other, e.g. "No reference in the files to evidence substance misuse in the community".

7.2.1 Risk and Needs Meeting
A brief meeting between PBSW and the Case Co-ordinator should take place to ensure information transferred to the Risk & Needs Assessment is accurate, comprehensive and provides a holistic view of the case. At this point, provisional ratings of need should also be agreed.

At the pre-release stage for prisoners subject to the MAPPA Process, this meeting will be the point where Stage 1 notification is sent to the relevant MAPPA Co-ordinator.

7.3 Relevant Information
Substance Misuse

	Trial Judge Report	SER	Risk Assessments	Core Screen	Psychological or Psychiatric reports	Hall Staff Reports	Specialist Reports
Evidence of substance misuse in the community including (for each substance) age misuse began, type and level of misuse, and duration/frequency of misuse	◆	◆	●	◆	●	◊	◆
Has the offender a history of combining different drugs, or combining drugs and alcohol?	◆	◆	●	◊	●	◊	◆
Is there evidence of the prisoner using substances in response to specific situations, for example, when stressed, or when socialising?	●	◆	●	◊	●	◊	◆
Convictions associated with misuse, e.g. offences under the Misuse of Drugs Act or drunk driving. [1]	◆	◆	●	◊	●	◊	◆
Evidence of substance misuse whilst in custody. [2]	◊	◊	◊	◊	◊	◆	◆
Evidence of interventions undertaken and response (e.g. end of programme report, behavioural reports)	◊	◆	●	◊	●	◆	◆
Evidence of contact with the Addictions Team and outcome (e.g. Case Conference reports)	◊	◆	●	◊	●	●	◆
Any contact with outside agencies (e.g. Alcoholics Anonymous)	◊	◆	●	◊	◆	◊	●
Has substance misuse been linked as a factor in their offending behaviour?	◆	◆	◆	◊	●	◊	◆
Any reference to links between substance misuse and other criminogenic needs under ICM, e.g. employment, relationships, mental health etc?	◆	◆	●	◊	●	◊	◆
Has the offender demonstrated willingness to address their substance misuse?	●	◆	●	◆	●	◆	◆

1. See also list of previous convictions.

2. See also MDT results and misconduct reports.

◆ = very likely source   ● = likely source   ◊ = less likely source

Mental Health

	Trial Judge Report	SER	Risk Assessments	Core Screen	Psychological or Psychiatric reports	Hall Staff Reports	Specialist Reports
Do the records indicate the prisoner has ever been diagnosed with any personality disorder or mental illness? (include dates, age at diagnosis, symptoms, type of disorder and source of information)	●	◆	●	◊	◆	◊	◆
Evidence of contact with psychiatric/psychological services or the Mental Health Team whilst in custody	◊	●	●	◊	◆	◊	◆
Evidence of treatment received and response, either in custody or in the community	●	◆	●	◊	◆	●	◆
What insight does the prisoner appear to have regarding their condition?	◊	◆	●	◊	◆	●	◆
Evidence of coping difficulties whilst in custody (e.g. unusual or bizarre behaviours not related to violence or substance misuse)	◊	◊	●	◊	◆	◆	◆
Evidence of history of self-harming behaviours or attempted/threatened suicide.	◊	◆	●	◊	◆	●	◆
Has any personality disorder or mental illness been linked as a factor in their offending behaviour? Give details.	◆	◆	◆	◊	◆	◊	◆
Any reference to links between personality disorder or mental illness and other criminogenic needs under ICM, e.g. substance misuse or resettlement issues?	◆	◆	●	◊	◆	◊	◆
Has the offender demonstrated willingness to work with the mental health team?	●	◆	●	◊	◆	◆	◆

NB: If you have come across any issues with regard to the prisoner's wellbeing, you should consider using Act2Care procedures. As a minimum, you should communicate your concerns to staff looking after the prisoner in the residential area.

◆ = very likely source   ● = likely source   ◊ = less likely source

Learning

	Trial Judge Report	SER	Risk Assessments	Core Screen	Psychological or Psychiatric reports	Hall Staff Reports	Specialist Reports
Evidence of qualifications achieved at school, college, university etc. (include dates)	◊	◆	●	◊	●	◊	◆[1]
Evidence of qualifications already achieved in custody (include dates)	◊	◊	●	◊	●	●	◆[1]
Any qualifications started but not completed (include dates)	◊	◆	●	◆	●	◊	◆[1]
Has an Adult Literacies (formerly Basic Skills) Screening or Assessment been undertaken and, if so, what was the outcome?	◊	◊	◊	◊	◊	◊	◆
Has learning (or lack of learning) been linked as a factor in their offending behaviour	◆	◆	◊	◊	◊	◊	◆
Any reference to links between learning and other criminogenic needs under ICM, e.g. employment	◆	◆	●	◊	●	●	◆
Has the offender demonstrated willingness to engage in learning, either prior to sentence or since conviction? Include details, e.g. specific courses, subjects.	◊	●	◊	◆	●	◆	◆

1. Learning Centre Reports.

◆ = very likely source   ● = likely source   ◊ = less likely source

Skills/Employment

	Trial Judge Report	SER	Risk Assessments	Core Screen	Psychological or Psychiatric reports	Hall Staff Reports	Specialist Reports
Work history including number/type of jobs, reasons for changing jobs/employment (include dates)	●	◆	●	◊	●	◊	◆[1]
Employment status at the time of the index offence	◆	◆	●	●	●	◊	◆
Evidence of Vocational Training qualifications gained prior to custody, e.g. apprenticeships, SVQs (include dates)	◊	◆	●	◊	●	◊	◆
Evidence of Vocational Training qualifications gained whilst in custody, e.g. Scottish Progression Awards (SPAs) (include dates)	◊	◊	◊	◊	◊	●	◆
Has employment (or the lack of) been linked as a factor in their offending behaviour	◆	◆	◆	◊	◊	◊	◆
Any reference to links between employments and other criminogenic needs under ICM, e.g. finances	◆	◆	●	◊	●	◊	◆
Has the offender demonstrated a willingness to prepare for employment? Include details, such as specific skills and jobs identified.	◊	◆	◊	◆	●	◆	◆
Has the offender identified any barriers that are preventing access to employment, e.g. benefit, disability?	●	◆	◊	●	◊	●	◆[1]

1. Learning Centre Reports.

◆ = very likely source   ● = likely source   ◊ = less likely source

Social Care – Accommodation

	Trial Judge Report	SER	Risk Assessments	Core Screen	Psychological or Psychiatric reports	Hall Staff Reports	Specialist Reports
Where was the prisoner living prior to custody, including any details about accommodation type (e.g. renting, with/without family, how long he/she had been there etc.)	◊	◆	◆	◆	●	●	◆
Where was the prisoner living at the time of the offence, including any details about accommodation type (e.g. renting, with/without family, how long he/she had been there etc.)	◆	◆	◆	◊	●	●	◆
Accommodation history prior to time of index offence – types, duration and why ended (include dates)	●	●	●	◊	●	◊	◆
Has the prisoner previously received assistance with accommodation, including details such as who from and when	◊	●	◊	◆	◊	◊	●
Any reference to links between accommodation and other criminogenic needs under ICM, e.g. finances	●	◆	●	◊	●	◊	◆
Has accommodation status been linked as a factor in their offending behaviour?	◆	◆	◆	◊	◊	◊	◆
Are there any other factors that appear to impact on their accommodation status, e.g. responsivity issues, victim issues	●	◆	●	◊	●	◊	◆
Any details of plans for accommodation upon release, and willingness to access help with this	◊	●	◊	◆	◊	●	◆
Any factors to take into consideration that might limit their options, e.g. location, schedule 1 etc	◆	◆	●	◊	◊	◊	◆

◆ = very likely source   ● = likely source   ◊ = less likely source

Social Care - Finances

	Trial Judge Report	SER	Risk Assessments	Core Screen	Psychological or Psychiatric reports	Hall Staff Reports	Specialist Reports
Prior to custody, what was their main source of income? (e.g. were they in receipt of benefits or were they in employment?)	◊	●	◊	◆	◊	◊	◆
Prior to custody, did they have any outstanding debts/fines?	◊	●	◊	◆	◊	◊	◆
What was their main source of income at the time of the offence?	◊	●	◊	◆	◊	◊	◆
Is there a history of financial difficulties prior to the offence?	◆	◆	●	◆	◊	◊	◆
Has the prisoner previously received assistance with financial difficulties, including details such as who from and when	◊	◆	◊	◆	◊	◊	◆
Has financial status been linked as a factor in their offending behaviour, for example, whether financial gain has been deemed to be a motivating factor?	◆	◆	◆	◊	◊	◊	◆
Are there any other factors that appear to impact on their financial situation, e.g. gambling or other behaviours.	●	◆	●	◊	●	◊	◆
Any reference to links between financial status and other criminogenic needs under ICM, e.g. accommodation	◆	◆	●	◊	●	◊	●
Any indicators of willingness to seek help with financial situation?	◊	●	◊	◆	◊	●	◆
Are others reliant on the offenders income?	◊	◆	◊	◆	●	◊	◆

◆ = very likely source   ● = likely source   ◊ = less likely source

Resettlement Issues

	Trial Judge Report	SER	Risk Assessments	Core Screen	Psychological or Psychiatric reports	Hall Staff Reports	Specialist Reports
Does the prisoner currently have a supportive family/partner/friends? (Give details)	◇	◆	◇	◆	●	●	◆
Who are they currently associating with whilst in custody in terms of prosocial (or antisocial) support? [1]	◇	◇	◇	◇	◇	◆	◆
Prior to custody, did the prisoner have a supportive family/partner/friends? (Give details)	◇	●	◇	◇	●	●	◆
At the time of the offence, did the prisoner have a supportive family/partner/friends? (Give details)	◆	◆	◇	◇	●	●	◆
Prior to the offence, did the prisoner have a supportive family/partner/friends? (Give details)	◆	◆	◇	◇	●	●	◆
Is there any evidence of negative peer influence in general prior to or at the time of the offence, e.g. criminal friends and acquaintances, or who misuse substances?	◆	◆	●	◇	●	◇	◆
Are there, or have there been, any difficulties with access to children?	◇	◆	◇	◆	◇	◆	◆
Is there evidence of them accessing support from organisations in the community, e.g. social work, housing associations etc?	◇	●	◇	◇	●	◇	◆
Is there evidence of them accessing support from staff in custody, e.g. Chaplaincy?	◇	◇	◇	◆	●	◆	◆
Family/Peer contact whilst in custody (include any special provisions necessary for visitors – identified at Core Screen) [1]	◇	◇	◇	◆	◇	◆	◆
Any reference to links between relationships with family and peers and other criminogenic needs under ICM, e.g. accommodation, substance misuse?	◆	◆	●	◇	●	◇	◆

◆ = very likely source   ● = likely source   ◇ = less likely source

Resettlement Issues Continued

	Trial Judge Report	SER	Risk Assessments	Core Screen	Psychological or Psychiatric reports	Hall Staff Reports	Specialist Reports
Have their relationships with family or peers been identified as playing a role in their offending behaviour?	◆	◆	◆	◇	◇	◇	◆
Any indicators of willingness to work with others and seek help during custody and upon release?	◇	◆	◇	◆	◇	●	◆
Any indicators of motivation to maintain or develop relationships with family or peers during custody or upon release?	◇	◆	◇	◆	◇	◆	◆

1. See also visits records sheets, mail received or use of telephone.

◆ = very likely source   ● = likely source   ◇ = less likely source

Violent Conduct

	Trial Judge Report	SER	Risk Assessments	Core Screen	Psychological or Psychiatric reports	Hall Staff Reports	Specialist Reports
Any references to the role of violence, or degree of violence, in their current index offence.	◆	◆	◆	◇	●	◇	◆
All previous non-sexual violence in the community, including dates and age of prisoner at the time. [1]	●	◆	◆	◇	●	◇	◆
For each violent offence, record age/sex of victim and prisoner's relationship with victim.	◆	◆	●	◇	●	◇	◆
Any evidence of the use of weapons, either in custody or in the community.	◆	◆	◆	◇	●	◆	◆
All aggressive and violent conduct whilst in custody, including details of severity and density.	◇	◇	●	◇	●	◆	◆
Any evidence of difficulty controlling anger/emotions or coping poorly with stress or frustration, in the community or in custody	◆	◆	◆	◇	◆	◆	◆
Any evidence of insight into the causes of their violent behaviour	●	◆	●	◇	◆	●	◆
Evidence of interventions undertaken, and outcomes in terms of change in attitude/behaviour.	●	◆	●	◇	◆	◆	◆ [2]
Any reference to links between violence and other criminogenic needs under ICM, e.g. substance misuse?	◆	◆	●	◇	●	◇	◆
Any indicators of willingness to address violence or anger management?	●	◆	◇	◆	◆	◆	◆

1. See previous convictions sheet and information from VISOR.

2. Check Post Programme Reports.

◆ = very likely source   ● = likely source   ◇ = less likely source

Inappropriate Sexual Conduct

	Trial Judge Report	SER	Risk Assessments	Core Screen	Psychological or Psychiatric reports	Hall Staff Reports	Specialist Reports
Provide details of any reference to a sexual element in the current index offence	◆	◆	◆	◇	◆	◇	◆
All previous sexual offences in the community including dates and age of the prisoner at the time [1]	◆	◆	◆	◇	●	◇	◆
Provide details of the age and sex of all victims, and their relationship with the victim	◆	◆	●	◇	●	◇	◆
Detail all inappropriate sexual conduct whilst in custody, including severity and density	◇	◇	●	◇	◇	◆	◆
Any evidence of their insight into the causes of their sexual offending	◆	◆	●	◇	◆	◇	◆
Evidence of interventions undertaken, and outcomes in terms of change in attitude/behaviour.	●	◆	●	◇	◆	◆	◆[2]
Any reference to links between inappropriate sexual conduct and other criminogenic needs under ICM, e.g. substance misuse, accommodation?	◆	◆	●	◇	●	◇	◆
Any indicators of willingness to address inappropriate sexual behaviour	●	◆	◇	◆	◆	◆	◆

1. See previous convictions sheet and information from VISOR.

2. Check Post Programme Reports.

◆ = very likely source   ● = likely source   ◇ = less likely source

Other Offending Behaviour

	Trial Judge Report	SER	Risk Assessments	Core Screen	Psychological or Psychiatric reports	Hall Staff Reports	Specialist Reports
Number of previous convictions and number of categories of offending [1]	◊	◆	●	◊	●	◊	●
Evidence of offending against prison discipline [2]	◊	◊	●	◊	◊	●	●
Evidence of decision making skills, e.g. poor outcome, not dealing with problems, not considering others or seeking help and being proactive	◆	◆	●	◊	●	◆	◆
Evidence of pro-criminal attitudes or behaviour [3]	◆	◆	◆	◊	◆	◆	◆
Evidence of insight into problem solving skills, e.g. recognising deficits/difficulties or identifying areas they could improve	◆	◆	◊	◆	◆	◆	◆
Evidence of impulsivity, e.g. opportunistic offences, jumping to assumptions	◆	◆	◆	◊	◆	◆	◆
Evidence of dysfunctional relationships, e.g. exploiting others, or being passive	◆	◆	◊	◊	◆	◆	◆
Evidence of interventions undertaken, and outcomes in terms of change in attitude/behaviour.	●	◆	●	◊	◆	◆	●
Any reference to links between other offending behaviour and other criminogenic needs under ICM, e.g. employment, substance misuse?	◆	◆	●	◊	●	◊	◆
Any indicators of willingness to seek help in addressing offending behaviour?	●	◆	◊	◆	◆	◆	◆

1. See previous convictions sheet.
2. See Governor's reports.
3. Check Post Programme Reports.

◆ = very likely source   ● = likely source   ◊ = less likely source

Responsivity

	Trial Judge Report	SER	Risk Assessments	Core Screen	Psychological or Psychiatric reports	Hall Staff Reports	Specialist Reports
Any evidence of denial of the offence	●	◆	◇	◇	●	◆	◆
Any evidence indicating a learning difficulty/disability	◆	◆	◆	●	◆	●	◆
Any evidence to indicate any physical impairment	◆	◆	●	◆	◇	◆	◆
Any evidence of communication barriers, e.g. English not their first language, or literacy levels	●	◆	◇	◇	●	●	●
Any evidence of low IQ from formal assessments	◇	◆	◇	◇	◆	◇	◆
Any reference in the files to antisocial personality/ psychopathy (if yes*, provide brief information and refer to where the full report is filed)	◇	◆	◆	◇	◆	◇	◆
Any evidence of a history of self-harm or suicide attempts/ threat from the Mental Health section	◇	◆	◇	◇	◆	◆	◆
Any information about cultural/ethnic issues	◆	◆	●	◆	◆	◆	◆
Any information about gender-specific issues	◆	◆	◇	●	◆	◆	◆
Any information about issues around sexual orientation	●	◆	◇	◇	◆	◆	◆
Evidence of sexist, racist, homophobic or other negative attitudes	◆	◆	◇	◇	◆	◆	◆
Any evidence of concerns about interventions, e.g. confidentiality, duration etc.	◇	◆	◇	◇	◆	◆	◆
Any evidence of emotional distress, with details, for example, if situation specific, such as groupwork	●	◆	◇	◇	◆	◆	◆
Is there any evidence of them having themselves been a victim? If so, indicate this, but do not provide details – simply state where further information can be found.	◇	◆	◇	◇	◆	●	◆

* If yes, Psychology should be notified and invited to their Case Conferences.

◆ = very likely source   ● = likely source   ◇ = less likely source

8. RATING GUIDELINES

8.1 Need for Intervention

Once information has been collated for the Risk & Needs assessment, a provisional rating should be made for each domain regarding the level of need for the service providers to make contact with the prisoner. The following tables provide some guidelines for making this rating in each domain.

The first category scores 0 and refers to the factor being "seen as an asset to community adjustment". This column is unlikely to be used very often, as it represents an outstanding strength in that area that could be seen as a protective factor against re-offending upon release. For example, if the prisoner has had steady, continuous employment from the point where they completed their education up until the point where they came into custody, and that employment gave them job satisfaction and it is likely that they will be able to go back into that employment post release, employment may be seen as an asset to their reintegration back into the community and as a protective factor against them re-offending in the future.

It should be noted that it is not possible in some areas to achieve a rating of 0. For example, with regard to substance misuse and mental health, the absence of any problem behaviour in these domains in the past does not represent a strength but rather that there is no evidence of need to improve.

Similarly, inappropriate sexual conduct, violent conduct and other offending behaviour are all negative behaviours that can never reflect a strength. At best, the absence of these problem behaviours can be rated as no evidence of need to improve.
The remaining three columns represent:

- No evidence of need – scores 1
- Some need – scores 2
- Considerable need – scores 3

No evidence of need is applicable in two very different situations:

1. There is evidence that the prisoner has particular strengths in an area, and hence has no immediate need.
2. There is no evidence at all, and it is therefore impossible to make an informed judgement.

There follows guidelines to help staff rate level of need across all the domains. The notes under each column reflect some of the key behaviours or characteristics staff may look for when making judgements about the level of need. It is unlikely that a prisoner will fall neatly into one category, and at the Risk and Needs Meeting (see page 27). The Case Co-ordinator and Social Worker will need to work together to reach agreement about which category most accurately represents that prisoner in each domain. This assessment will be examined, utilised and agreed at the Case Conference, where further information may become available.

8.2 Need for Support

Need for support should not be rated unless a specific need is identified.

Prisoners may require additional support from various members of staff in a range of situations, for example:

- Upon transfer to a lower security establishment
- Following completion of an intervention (e.g. violent conduct – encouraging the prisoner to apply the skills to real life situations they encounter in the halls)
- Following a significant life event, involving themselves or family, that might lead to them being at high risk of relapse

Support does not necessitate a formal intervention as it can be provided on an informal basis by the Personal Officer, Caseworker or another service provider, as agreed.

8.2.1 High level of need for support (Score of 3)

If the prisoner requires some form of formal, structured support, involving staff maintaining a record of contact with them, they should be allocated a high level of need for support. For example, if a prisoner has an anger management problem that has caused them significant problems on their hall, it might be agreed that they need a high level of support after they have completed the Anger Management Programme to help them to apply the skills in real-life situations. Following discussion between staff and prisoner, it might be agreed that this should take the form of meeting with their personal officer or one of the programme tutors once a fortnight; and providing them with a diary of their use of the skills, discussing how effective the skills were; and discussing how they could continue to develop and improve their use of the skills in the future.

Similarly, if the prisoner has completed work addressing substance misuse and they are moving to an open establishment or another environment they identify as posing a higher risk to themselves, it may be agreed that they would benefit from a high level of support from a drugs worker at the new location to support them in adhering to their Relapse Prevention Plans.

8.2.2 Medium level of need for support (Score of 2)

If the prisoner does not require the above structured support, but would benefit from staff being more aware of how they are coping with a situation, or changes in their emotions or behaviour, a rating of medium should be assigned. When assigning this level of need for support, it should be discussed with the prisoner:

- which members of staff would they wish support from;
- in which situations this support would be most required;
- what triggers would alert the staff to the need to discuss the situation with the prisoner;
- what changes would elevate the prisoner to require a higher level of support.

8.2.3 Low level of need for support (Score of 1)

If there is no evidence of a need for additional support, they should be provided with a rating of low need. This would tend to be the rating when there have been no changes in their circumstances or behaviour, and when no changes have been requested of them.

8.3 GUIDELINES BY DOMAIN

Factor seen as an asset to community adjustment	No evidence of immediate need for improvement	Some need for improvement	Considerable need for improvement

Substance Misuse - Drugs, Alcohol and Volatile Substances

| Rating not applicable in this domain | • Successful detox, clear urine tests
• Stabilised on medication
• Previous positive contact in community with the Throughcare Addiction Service(TAS) | • On Drug Detoxification
• Binge Drinking
• Addictions Care Plan
• 1:1 counselling
• < 31 day Prisoner misusing drugs with little support in community
• Occasional Misuse of Cannabis
• No G.P in community | • Unstable substance misuser
• Alcohol misuser
• Injecting Drugs whilst in Prison
• Poly Substance Misuse
• Pregnant and misusing drugs
• Continually positive for opiates on voluntary drug test
• Paraphernalia Care Plan
• Co-morbidity, e.g. Mental Health issues also present |

Mental Health

| Rating not applicable in this domain | • No evidence of mental health problems in the last 12 months
• Stabilised on medication | • Recent (within 3 months) anti-social behaviour which appeared to be related to poor coping
• More than 2 episodes in the past 3 months of anti-social behaviour where the cause was not known
• Subject to a mental health assessment in the past 6 months | • Very recent history of mental illness, i.e. within 3 months
• Recent (within 3 months) anti-social behaviour where a mental health issue was apparent
• Co-morbidity, e.g. Substance Misuse issue also present |

Overall needs rating scale			
	1	2	3

Factor seen as an asset to community adjustment	No evidence of immediate need for improvement	Some need for improvement	Considerable need for improvement
Learning			
• The prisoner has no literacy and numeracy needs as identified by initial screening • The prisoner has strong educational qualifications (e.g. HND/degree level)	• The prisoner has no literacy and numeracy needs as identified by initial screening • The prisoner has a range of personal interests or hobbies • The prisoner has good educational qualifications (e.g. Standard Grades 1 and 2, Higher or HNC)	• The prisoner has no literacy and numeracy needs as identified by initial screening • The prisoner has basic education qualifications (e.g. Standard Grade passes up to and including General Levels 3 and 4) • The prisoner indicates difficulties in writing text (e.g. letters, completing forms etc.) • The prisoner indicates difficulties in using numbers (e.g. working out percentages, understanding the 24-hour clock etc.) • The prisoner has only limited personal interests or hobbies • The prisoner wishes to complete a qualification she/he was part way through studying prior to entering custody	• The prisoner identifies some form of learning difficulty • The prisoner did not complete his/her secondary education • The prisoner has poor literacy and numeracy skills as identified by initial screening • The prisoner has no formal educational qualifications • The prisoner has no personal interests or hobbies • The prisoner wishes to complete a qualification she/he was part way through studying prior to entering custody
Overall needs rating scale			
0	1	2	3

Factor seen as an asset to community adjustment	No evidence of immediate need for improvement	Some need for improvement	Considerable need for improvement

Skill

• The prisoner has undertaken job related training to SVQ Level 3 or above • The prisoner can evidence extensive on-the-job training and/or informal job related training/ learning • The prisoner has undertaken certificated and/or non-certificated training in an area of employment where there are major job opportunities	• The prisoner has undertaken job related training to SVQ Level 2 or equivalent level • The prisoner can evidence a significant amount of non-certificated on-the-job training/ learning • The prisoner has undertaken certificated and/or non-certificated training in an area of employment where there are currently significant job opportunities • The prisoner can evidence good practical skills as a result of having a range of personal interests or hobbies	• The prisoner has done some basic formal job related training (e.g. Manual Handling, First Aid etc.) • The prisoner can evidence only a limited amount of non-certificated on-the-job training/ learning • The prisoner has undertaken certificated and/or non-certificated training in an area of employment where there are currently few job opportunities (indicating a retraining requirement) • The prisoner can only evidence a few practical skills as a result of having only limited personal interest or hobby	• The prisoner has done no formal job related training courses • The prisoner provides no evidence of non-certificated on-the-job training/ learning • The prisoner can not evidence any practical skills as a result of having no personal interests or hobbies

Overall needs rating scale			
0	1	2	3

Factor seen as an asset to community adjustment	No evidence of immediate need for improvement	Some need for improvement	Considerable need for improvement

Employment

• The prisoner has a job history characterised by holding down one job for several years and will be able to return to that job on release • The prisoner has an excellent understanding of the steps required to get a job • The prisoner has an excellent understanding of what the correct attitudes and skills are to keep a job • The prisoner's criminal record is such that it should provide no barriers to employment	• The prisoner has a job history characterised by having held down one or more jobs for at least two years. • The prisoner has a good understanding of the steps required to get a job • The prisoner has a good understanding of what the correct attitudes and skills are to keep a job • The prisoner has a good range of personal interests or hobbies the skills from which might contribute significantly to him/her getting a job • The prisoner's criminal record is such that it should provide few barriers to employment	• The prisoner has a job history characterised by short term jobs and periods of unemployment • The prisoner has a modest understanding of the steps required to get a job • The prisoner has a modest understanding of what the correct attitudes and skills are to keep a job • The prisoner has a limited number of personal interests or hobbies the skills from which might contribute in a limited way to him/her getting a job • The prisoner's criminal record is such that it provides significant barriers to employment	• The prisoner has no job history • The prisoner has a poor understanding of the steps required to get a job • The prisoner has a poor understanding of what the correct attitudes and skills are to keep a job • The prisoner has no personal interests or hobbies that might contribute to helping him/her get a job • The prisoner's criminal record is such that it provides major barriers to employment

Overall needs rating scale			
0	1	2	3

Factor seen as an asset to community adjustment	No evidence of immediate need for improvement	Some need for improvement	Considerable need for improvement
Social Care - Accommodation			
• The prisoner has suitable, stable accommodation arranged for their release • The prisoner has a history of stable accommodation	• The prisoner has no evidence of housing needs upon release • The prisoner is experienced in accessing appropriate accommodation	• The prisoner has a history of temporary housing • The prisoner relies on friends and family to accommodate him/her for temporary periods	• The prisoner will be NFA on release • The prisoner has lost his/her tenancy due to imprisonment • The prisoner has a history of homelessness • The nature of the prisoner's offence restricts where he/she can stay (sex/schedule 1 offence)
Social Care - Finances			
• The prisoner has a healthy bank balance/savings • The prisoner has a history of legitimate earnings • The prisoner has a positive history of managing their finances	• The prisoner has no evidence of financial needs • The prisoner has a supportive family willing to offer financial help upon release • The prisoner has a history of finding work and generating income	• The prisoner has outstanding debts • The prisoner has poorly managed debts in the past • The prisoner relies upon friends and family for financial support	• The prisoner has substantial debts, which have become unmanageable • The prisoner has used illicit money lending in the past • The prisoner has no money management skills • The prisoner's offending behaviour is directly related to a lack of money
Overall needs rating scale			
0	1	2	3

Factor seen as an asset to community adjustment	No evidence of immediate need for improvement	Some need for improvement	Considerable need for improvement

Resettlement Issues

Factor seen as an asset to community adjustment	No evidence of immediate need for improvement	Some need for improvement	Considerable need for improvement
• The offender's family offers them strong, prosocial support • The offender's family plays an active role in the ICM process	• The offender has good family links and support • The offender has no identified family needs • The offender has a history of using community resources positively to support them post-release • There is no evidence of potential need for parenting skills or relationship skills programmes	• The offender has minimal contact with and support from their family • The offender has an identified family need • There is evidence of some need for parenting skills or relationship skills programmes	• The offender's family relationship is unstable and problematic • The offender wishes to re-establish links with their family • Antisocial family attitudes are directly related to the offender or the offence • There is evidence of high need for parenting skills or relationship skills programmes

* family could mean immediate family, extended family or significant others

Violent Conduct (Reactive Anger and Instrumental Violence)

Rating not applicable in this domain	No evidence of immediate need for improvement	Some need for improvement	Considerable need for improvement
Rating not applicable in this domain NB: The rating for Violent Conduct should be based on the above information and independently of any information about previous work undertaken, e.g. programmes completed. 1 Risk assessments conducted since the recent conviction only 2 Acts of severe violence – those which "cause death or serious injury to or maiming of the victim" (Webster et al, 1997: p29)	• No history of violent offending • Evidence of risk assessment results[1] stating they are at low risk of violent reoffending. • No, or very little, evidence of misconduct reports for violent behaviour • Absence of evidence indicating the factors listed in the other two columns.	• Evidence of only one violent offence, unless it is murder • Evidence of more frequent offending, but of a non-severe[2] nature where serious harm is not caused, i.e. assault • Evidence of risk assessment results[1] stating they are at medium/moderate/raised risk of violent reoffending • Evidence of violence involved in other types of offences, though not causing serious harm. • Evidence of difficulty managing emotions, especially anger	• Evidence of severe[2] (murder, att murder, serious assault etc) or frequent violent offending history • Evidence of risk assessment results[1] stating they are at high risk of violent reoffending. • Evidence of severe or frequent violent offending against prison rules • Evidence of the escalation of violence (offending or prison conduct) • Evidence of the use of weapons • Evidence of poor anger management playing a significant role in offending behaviour

Overall needs rating scale			
0	1	2	3

Factor seen as an asset to community adjustment	No evidence of immediate need for improvement	Some need for improvement	Considerable need for improvement

Inappropriate Sexual Conduct

Rating not applicable in this domain NB: The rating for Inappropriate Sexual Conduct should be based on the above information and independently of any information about previous work undertaken, e.g. programmes completed.	• No history of sexual offending • Evidence from risk assessment[1] indicates they are not at risk of sexual offending • No evidence of inappropriate sexual behaviour in custody • Absence of evidence indicating the factors listed in the other two columns.	• Evidence of at least one sexual offence, historical or index • Evidence from risk assessment[1] indicates they are at medium/some/moderate risk of sexual offending • Some evidence of inappropriate sexual behaviour in custody/community placements, though not enough to warrant action taken • Evidence of sexual behaviour in one offence • Evidence to indicate plea-bargaining, e.g. murder/rape to murder.	• Evidence of severe (e.g. rape, prolonged child abuse) or frequent (more than three) sexual offending history • Evidence from risk assessment[1] indicates they are at raised/high risk of sexual reoffending • Evidence of sexually inappropriate behaviour within custody/community placements, leading to investigation, charge or misconduct reports • Evidence of sexual behaviour in more than one offence

1 Risk assessments conducted since the recent conviction only

Overall needs rating scale			
0	1	2	3

Factor seen as an asset to community adjustment	No evidence of immediate need for improvement	Some need for improvement	Considerable need for improvement
Other Offending Behaviour (Problem Solving, Impulsiveness and Anti-Social Attitudes)			
Rating not applicable in this domain NB: The rating for Other Offending Behaviour should be based on the above information and independently of any information about previous work undertaken, e.g. programmes completed.	• First custodial sentence • Evidence of risk assessment results[1] stating they are at low risk of re-offending • No evidence of poor problem solving skills as described in the other columns • No evidence of misconduct reports or poor institutional behaviour • No evidence of antisocial/procriminal attitudes	• Evidence of more extensive offending history, e.g. 2 or 3 custodial sentences • Evidence of risk assessment results[1] stating they are at medium/moderate risk of re-offending • Evidence of poor problem solving e.g. jumps in without thinking, does not consider options or consequences, does not seek help with problems or does not always do so appropriately • Evidence of some problematic behaviour in custody • Evidence of some antisocial/procriminal attitudes	• Evidence of extensive offending history • Evidence of risk assessment results[1] stating they are at high/raised risk of re-offending • Evidence of poor problem solving e.g. jumps in without thinking, does not consider options or consequences, does not seek help with problems or does not always do so appropriately • Evidence of poor relations with staff or other prisoners and a history of misconduct reports • Evidence of extensive or entrenched antisocial/procriminal attitudes underpinning their behaviour.

1 Risk assessments conducted since the recent conviction only

Overall needs rating scale			
	1	2	3

8.4 REVIEWING NEED

8.4.1 Progress Reviews
Annual and Pre-Release
The progress reviews are an update of all relevant domains for the period between the previous Case Conference and the date when the progress review is completed. This review should focus only on the positive and adverse developments evidenced by the prisoner. The majority of the content will be provided on an ongoing basis by all service providers engaged with the individual. Any information that becomes available such as post programme reports or even the trial judge reports if they were unavailable at the previous Case Conference should be utilised in the progress review to fully inform the Case Conference

Pre-Parole Progress Summaries
This summary is required in addition to the last Case Conference minute if the Parole Qualification Date (PQD) is 9 months or more from the previous Case Conference. The summary should focus solely on any actions undertaken, or not, for the period following the Case Conference and prior to the date when the paperwork is submitted, usually 6 months prior to PQD.

The minute of the Case Conference will be sufficient for the above purposes if the Case Conference is held in the period between 9 months to 6 months prior to PQD as this fits directly with the timescales required for the collation of parole documentation.

ICM CASE CONFERENCE GUIDELINES

9. Aims

The Case Conference is held at set intervals during a prisoner's sentence as outlined in the ICM process, with the following aims:

• to examine, utilise and agree the risk assessment in relation to the prisoner;
• to affirm the prisoner's level of need across a number of key areas relating to their risk;
• to explain (a) and (b) to the prisoner and seek their views on same;
• to discuss ways of reducing or managing the assessed risks, particularly by meeting the assessed needs;
• to involve the prisoner in developing an action plan for the next reporting period, including referrals via PR2 to service providers for appropriately sequenced interventions

10. Setting up the Case Conference

10.1 Scheduling and Attendance
The Case Conference has a core membership of the following staff:

• Case Co-ordinator
• Prison Based Social Work
• Community Based Social Work
• Prisoner

This group constitutes the minimum **expected** requirements for the conference to take place.

Local Authorities and Prisons will wish to organise themselves to ensure that their systems best fit the case conferencing approach to ensure maximum attendance. Case Conferences should be scheduled with careful consideration and sensitivity towards maximising the availability of the Community supervising officer to attend. This includes providing at least four weeks notice, providing some flexibility of choice of dates, and attempting to schedule several Case Conferences for the same authority on one day. For example, if there are three prisoners from the Dumfries and Galloway area located in Peterhead prison, it would be useful to align (if possible) their Case Conference schedule. There is a need for co-operation, dialogue and understanding between agencies in order to ensure that the Case Conference process operates as efficiently and effectively as possible.

To achieve the above requires careful balance of scheduling and ensuring that the process timeline remains intact. In other words, the initial Case Conference should take place **within 6 months of sentence and prisoners should go no more than 12 calendar months between annual Case Conferences.**

It should also be noted that staff attendance at the Case Conferences is a Performance Measure for SPS and local authorities, and full attendance of the core membership is expected at all times. Video conferencing facilities are available to achieve this aim.

Once all reasonable steps have been taken to assist community based colleagues in attending the Case Conference but they are unable to do so, then the Case Conference should take place as scheduled and the reason for the non attendance recorded on PR2 for audit purposes. In addition, the supervising officer should record in their casefile the reasons for the non-attendance and this should be countersigned by the line manager. Local authorities will want to put in place appropriate performance monitoring and management arrangements to monitor attendance at Case Conferences.

10.2 Sharing the Risk and Needs Assessment
Following the Risk & Needs meeting, and at least two weeks prior to the Case Conference, the Case Co-ordinator should send the completed Risk and Needs assessment to the prisoner's Personal Officer and to Community Based Social Work. It is the Personal Officer's responsibility to disclose the assessment to the prisoner, and check their understanding of the contents and the Case Conference process. At this point, the prisoner should also be reminded of their responsibilities in the process, and the benefits of playing an active role.

10.3 Invitations

The Case Co-ordinator should also ensure invites are sent to:

- other members of the core membership, as described above;
- the prisoner's personal officer (if applicable);
- all service providers working with the prisoner in the previous reporting period;
- all service providers expected to work with him/her during the next year or, in the case of the pre-release Case Conference, whatever time remains on their sentence;
- the prisoner's family, if it is deemed appropriate by the Community Based Social Worker, and the prisoner wishes to invite them;
- staff responsible for any risk assessments undertaken during the last reporting period;
- the Lifer Liaison Officer (for Life Sentenced Prisoners only)

Social Work staff, or other service providers, may be aware of other external agencies to whom an invite should be sent. For example, if the prisoner is approaching release, and has a drug problem, community based social work may wish to invite addiction services to the Case Conference. Community based social work should liaise with the Case Co-ordinator to arrange for this to take place.

Invites should be sent out at least **four** weeks prior to the Case Conference.

In the event that the prisoner does not wish to attend the Case Conference, the meeting should still go ahead for the purpose of continued risk assessment and risk management. Any service provider, personal officer or Lifer Liaison Officer who is aware that they will not be able to attend the meeting should submit written comments for discussion (See Annexe F – Report Templates). This will enable the other group participants to consider any particular issues that the prisoner may have. Reports should be attached to the Risk & Reports screen on PR2, though a copy should also be printed and disclosed to the prisoner prior to the Case Conference.

10.4 Preparation

All staff invited to attend the case conference will familiarise themselves with the Risk and Needs assessment within the CIP prior to attending, or in the event they cannot attend, prior to submitting their report.

In the event that any member of staff responsible for risk assessments during the last reporting period is unable to attend, the Case Co-ordinator should liaise with Psychology and Social Work for advice on how to proceed. It may be acceptable to have someone else trained in the administration of the specific risk assessment tool used in attendance to interpret the results.

10.5 Arrangements for Chairing Case Conferences

Case Conferences should be chaired by either the Prison Based Social Worker or the Case Co-ordinator. Prison staff will wish to consider an appropriate standard model for their establishment. Whatever system is agreed, the decision on who is chairing the meeting should be made well in advance and not be left to the actual day of the meeting.

10.6 Arrangements for Family Attendance

In anticipation of family members attending Case Conferences, staff should agree on a local model outlining whose responsibility it is to notify the appropriate departments about the arrival and departure arrangements for the family, as well as assigning the role of meeting and greeting the family members at the Gate. Community Based Social Work will play a significant role in preparing family members for the Case Conference (eg. in providing information on the process and the aims and objectives).

10.7 Recording and Communicating the Outcomes of the Case Conference

The Case Co-ordinator is also responsible for ensuring that during the meeting the outcomes of the Case Conference are recorded, and later entered onto PR2. This includes attaching the actual minutes of the Case Conference, entering any referrals agreed upon at the Case Conference, and entering the post-conference Levels of Need across the domains. They should ensure a copy of the minutes is sent to Community Based Social Work.

All attendees at the Case Conference have a responsibility to check that the minutes are an accurate, factual representation of discussions held, and that they are content that their contribution has been accurately reflected. They should notify the Chair **within 14 days** of receiving the minutes of any concerns or requests for changes to the minutes. In the event that they foresee difficulties with meeting this deadline, they should raise this with the Chair and discuss alternative ways to ensure the ratification of the minutes as soon as possible post Case Conference.

The Personal Officer should provide the prisoner with a copy of the outcomes of the Case Conference (whether they attended or not). This should be accompanied by the form under Annexe H, allowing the prisoner to comment on the record of the discussions. This feedback should be passed back to the Chair of the Case Conference.

10.8 Legal Representation at Case Conferences
On occasions, prisoners may request legal representation at Case Conferences. The prisoner should be informed that it is not appropriate for their legal representatives to attend the Case Conference. If they need to seek legal advice, they can do so at the stage where they receive the risk and needs documentation prior to the Case Conference, or when receiving the minutes of the Case Conference, via the normal process of agents visits or legal correspondence.

11 Planning the Case Conference agenda

11.1 General areas of focus
In general terms, the Case Conference can be conceived as having four key tasks, which are related to: risk assessment, planning, intervention and evaluation/review.

The weight and attention given to the various issues raised may change during the prisoner's journey through custody.

At the initial Case Conference, the focus may be more on helping the prisoner understand the prison environment; motivating them to address difficulties, especially offending, starting to plan specific interventions that might be necessary; and explaining how best to maintain family/social contacts.

During the mid phase of the sentence, the Case Conference's attention may focus more on how much progress has been made by the prisoner in addressing his/her difficulties; how much stability there has been in the prisoner's circumstances; what interventions the prisoner has participated in; what the outcomes of these were; and when a prisoner might best benefit from a move to top end/open conditions.

In the pre-release phase, it is likely that the Case Conference will want to focus on the progress the prisoner has made overall; their plans for release; the support on offer to the prisoner from family/friends; an explanation of the licence conditions; an explanation of what supervision will entail; and the possibility of other services being involved in that supervision action plan.

11.2 Risk Assessment

As stated above, a key task for the Case Conference is to examine, utilise and agree the prisoner's risk assessment. Fundamentally, this process involves all the relevant parties in:

- Sharing information;
- Being clear about the accuracy, validity and usefulness of that information;
- Making explicit their views on what action is necessary to minimise the risks;
  and
- Setting timescales for a review of the risk assessment.

All prisoners within the Enhanced ICM process will have a structured risk assessment completed by Prison Based Social Work, which will be carried out prior to the initial Case Conference and then annually thereafter. Staff will have differing degrees of familiarity with the risk assessment tools used for this purpose. The prisoner (and his/her family) will probably be unaware of how these tools have been developed or how they operate. It is vitally important that the authors of the risk assessment explain the process that has been undertaken and the data that has been used to inform the risk assessment.

It is important to stress that risk assessment is not an exact science. Staff need to be aware of the possibility of bias and error playing a part in the risk assessment process. Using a structured risk assessment tool showing that the information used has been gathered from a variety of sources as opposed to just relying on the offenders' own self report, discussing it with the Case Conference members and listening to counter arguments, can protect against the effects of bias and error.

Equally, some commentators have argued that risk assessments often focus on the negative aspects in a person's circumstances without giving due attention to the positive ones. Staff will want to ensure that they assess to what extent there are protective factors that might have a positive effect on the risk assessment outcome.

11.3 Progression

The progression of the prisoner through their sentence should be commented on during the Case Conference. Consideration should be given to prioritising needs that will impact on the ability to make the transition to less secure conditions, i.e. Top end and Open. If at all possible, it should be explained to the prisoner what they require to focus on at each stage of their sentence in order to make the progression to Top end/Open.

Case Conferences are scheduled annually and a prisoner therefore may become eligible for progression to Top end or Open at a point in-between the annual Case Conferences. It would not be practical or operationally manageable to schedule another Case Conference to discuss progression alone. Those attending Case Conferences need to be alert to this possibility. SPS staff will play a crucial role in informing partner organisations of the likelihood of this occurring within the next 12 months.

Staff attending Case Conferences will require to address issues of risk. This is especially important in relation to progression, and home leave in particular. The SPS has used the Prisoner Supervision System as the main tool to frame risk, primarily in relation to the security supervision level categorisation that the prisoner has attained: **low security supervision level** equating to a **low risk** prisoner. It is important that risk be reframed to focus on reoffending and harm. Public protection and community safety must be key considerations for all those involved in the progression and home leave process*.

An example of an early trigger of intervention to assist in this process includes engaging the housing provider early in the process where an offender has a housing need.

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* For further information on home leave, staff should refer to Circular No. JD 1/2007

11.4 Sequencing

Sequencing programmes involves arranging for an offender to attend two or more programmes consecutively in order to address and meet their individual risk and needs. It aims to ensure that all interventions delivered by relevant agencies are carried out in a coherent and planned way, building on what has been done previously (the seamless sentence). The purpose of sequencing is to deliver interventions taking into account issues such as timing, combination and dosage, and to identify patterns of interventions that work for various profiles of offenders to reduce re-offending. The results of research inform how best to target, tailor and sequence a package of interventions to an offender profile to reduce re-offending. This is based on the What Works principles as follows:

Risk principle – the degree of intervention required in each case should be related to an assessment of the risk of re-offending and the risk of serious harm. Intensive treatment programmes such as the Violence Prevention Programme are therefore best delivered to higher risk cases.

Needs principle – interventions in each case should be targeted on those personal and social factors that are assessed as being likely to cause re-offending, i.e. criminogenic needs.

Responsivity principle – interventions should be based on methods which are demonstrably effective in reducing offending, and which are responsive to the culture, gender and learning styles of individual offenders.

Sequencing will normally take place when the likelihood of reconviction is high and when an offender has a wide range of criminogenic needs that makes them suitable for more than one programme. The general rules of sequencing are as follows:

- The first stage of sequencing is to ensure that offenders are able to participate in programme work. It is therefore important that responsivity issues such as literacy difficulties/mental illness are addressed at the earliest stage in the prisoner's sentence and prior to engaging in any form of group or offence specific work.
- Encourage individuals to address any problems with drug misuse at the earliest stage in their sentence in order to provide optimum conditions for successful participation in interventions. This is due to the fact that if an individual is under the influence of drugs, this could impinge on their ability to engage in offence- focussed work.
- Sequencing normally consists of pairing a general offending behaviour programme such as cognitive skills with a more specialist programme, such as a substance misuse, sexual or violent offending programme. Within this framework, the individual should participate in the cognitive skills group first. This is in order to provide them with an introduction to group work and problem solving/self-management skills.
- On occasions two specialist, offence-specific programmes may also require to be sequenced. When this is the case, it is important to be aware of the selection criteria of these programmes. For example, within the Violence Prevention Programme it is recommended that individuals need to address outstanding issues with regard to sexual offending before completing the violence programme, and also substance misuse problems should be addressed before participating in more specialist programmes.
- Accredited programmes also need to be part of a broad range of interventions that meet the wider needs of offenders, including tackling basic skills deficits and fundamental practical issues such as housing, jobs and debt. Therefore assessors should also consider combinations of offending behaviour programmes with other interventions addressing needs associated with reconviction, such as basic social skills and employment.

12 Running the Case Conference

12.1 Introductions and setting the scene

Chair to facilitate general introductions and ensure that all parties, especially the prisoner and the family (if present), feel welcome.

The Chair should explain to all those present the purpose of the Case Conference. In general terms, the Chair should note that the purpose of the meeting is to:

- Examine the assessment of risk and need that pertains to the prisoner;
- Discuss the sequencing of the actions and interventions that are deemed necessary to help the prisoner to minimise those risks;
- Consider the prisoner's progress to date through the prison system;
- Examine the prisoner's plans for release in the future; and
- Consider issues relating to public protection and victim interests.

The Case Conference should seek to involve the prisoner – and their family, if present – fully in the meeting. They are central to the process. It is therefore imperative that the prisoner – and their family, if present – fully understands the function of the Case Conference.

12.2 Initial Case Conference
If it is an **Initial Case Conference,** it may be useful to start by checking some basic facts with the offender, such as their index offence and sentence length. You may also find it useful to establish whether they have completed any offending behaviour work on previous sentences/in the community. If so, the prisoner should be encouraged to explore what they have learned from the offence, and what they could have done differently using skills previously learnt. They may also identify at this stage additional skills they feel could help them in the future.

NB: If it is their first custodial sentence, it may be prudent to spend some time discussing how they are adapting to prison life.

12.3 Annual Case Conference
If it is an **Annual Case Conference,** it may be useful to ask the prisoner about their experience of the ICM process over the previous year and the progress they feel thay have made. This does not need to be an in-depth discussion, but may provide useful feedback for working with them in the future   The annual Case Conference prior to the prisoner's parole qualifying date has an added responsibility. It must ensure that SPS colleagues are aware that an advance notification to the appropriate MAPPA Co-ordinator will be necessary for those prisoners who fall within the ambit of Section 10 of the Management of Offenders Act 2005. The Scottish Executive Justice Department Circular No. JD 15/2006 and associated guidance provides further information on the MAPPA .

12.4 Pre-Release Case Conference
The ICM **Pre-Release Case Conference** in effect replaces the Pre-Release meeting identified in the National Standards for Throughcare (para 114) and Circular 12/2002. The purpose of the ICM Pre-release Case Conference meeting is to finalise and explain the content of the Pre-Release Community Integration Plan to the prisoner. The Pre-Release CIP should make explicit what the prisoners' responsibilities will be on release, given that they will be subject to statutory supervision. It should include, amongst other things, the conditions that are attached to the prisoner's licence, any specific interventions/programmed work that the prisoner is expected to undertake in the community, any additional services that might be required, the level of contact with the supervising officer that the prisoner will be expected to adhere to on release etc.

The meeting should also stress the requirements of supervision in the community, making clear what will happen in the event of the committal of a further offence or non-compliance. If the prisoner is subject to the MAPPA procedures, a formal confirmation notification should be sent as soon as possible after the ICM case conference to the MAPPA co-ordinator who represents the local authority of the prisoner's ordinary residence.

12.5 Recall Case Conference

For an ICM **Recall Case Conference**, the focus of the meeting will be on the issues surrounding (1) the prisoner's return to custody and (2) the revision of the risk assessment and risk management plan. Key areas that it may be appropriate to examine are:

- the prisoner's compliance with the licence conditions
- the nature of any new charges or offences
- the prisoner's overall progress during the supervisory period
- the likelihood that the prisoner may be re-released on licence
- the interventions/services/supports that might be necessary during this period of custody and also as part of any new statutory licence or voluntary throughcare package
- the need to prepare reports for the Parole Board/Life Prisoner Tribunal/Court.

ICM Recall Case Conferences should be held as soon as practically possible, but within 6 weeks at the latest following the return to custody. This Case Conference replaces the need for a risk management group to be held in prison.

The Supervising Officer has a vital role to play in the Recall Case Conference, as do any other community based colleagues who may have had a significant input to the offender's risk management plan. It is important that the Supervising Officer (and any other relevant community based colleagues) attends the ICM Recall Case Conference, unless there are clear reasons which suggest that this is unnecessary. In such circumstances, the Supervising Officer should ensure that these reasons are recorded in the offender's case records. Importantly, the Supervising Officer should also ensure that the information noted above is passed to the Scottish Prison Service in order to allow it to better care for the prisoner and to fulfil public protection functions (e.g. referral to the MAPPA co-ordinator).

12.6 Risk assessment

The current assessment of risk should be discussed and agreed by the group. There may have been more than one risk tool used during the previous reporting period, and the outcomes of all tools should have been recorded separately under PR2.

It is important that staff trained in Risk Assessment tools used are present at the Case Conference. The results of all tools should be used to inform the discussion with a view to agreeing:

- Risk of re-offending/reconviction - general, violent and sexual
- Risk of harm - including likely victims, and situational factors
- What areas the conference should focus on in order to work towards reducing risk.

If those present at the conference are not trained in the use of a risk assessment tool, any results using that tool should not be discussed without having first consulted Psychology and Social Work staff. (see para 2.7).

Risk is not static, it can change over time. Different circumstances and situations can also impact on risk. Under ICM, the process involves the analysis of information from a variety of sources in order to identify the likely risks that a person poses. This assessment of risk is based only on the information and sources available at the time of the Case Conference in order to focus on the resources and interventions required to reduce/manage the risk.

The prisoner should always be fully involved in discussions around risk, and encouraged to comment on assessments of risk made. If the prisoner disagrees with any assessments of risk, this should be accepted and recorded on the minutes.

It should be noted that there may be exceptional occasions when information will not be shared with the prisoner. This is likely in situations when it has be assessed that there would be a clear and real risk of harm to a victim(s) if the information was to be provided to the prisoner, e.g. in domestic abuse cases.

12.7 Action Plan

Section 3, Planning the Case Conference Agenda provides detailed guidelines on how to plan the content of the Case Conference. The action plan will comprise a variety of areas of work (or domains), though it may not be possible to discuss all domains in detail at every Case Conference. In the first instance, the prisoner's views should be used to give order to the agenda, with the discussions starting on those items that the prisoner views as important and has shown a motivation to address.

The following gives a basic outline of how to shape the Case Conference to meet the fundamental guidelines to planning the Case Conference:
- Needs within prison – general discussion to establish how the

prisoner is coping in prison and to put them at ease in the Case Conference.
- General health – this may lead to discussions around Substance Misuse and Mental Health, where relevant and appropriate.
- Resettlement Needs/Social Care Needs – family contact, visits, plans for release etc
- Learning, Skills, & Employability
- Inappropriate Sexual Conduct/Violent Conduct/Other Offending Behaviour

It should be noted, however, that it may be necessary to omit certain of the above areas, in order to allow appropriate focus and depth of discussion on prioritised areas for action.

If it is an Annual or Pre-release Case Conference, the action plan for the previous reporting period should be summarised before proceeding. Whilst the Chair will maintain overall control of the agenda, service providers should lead in each area, and all attendees should be encouraged to contribute when appropriate, particularly CJSW.

A new section should be started for each domain or area discussed. Each section will look at a number of concepts and issues, which are briefly described in this section. These guidance notes are principally taken from the Risk Management Authority (in press). Whilst their guidelines have chiefly been compiled to inform the management of offenders subject to an Order for Lifelong Restriction, the principles are applicable to risk management in general. As a consequence, each section will involve:

- Categorising the domains appropriately, as follows:

A **Risk Factor** – its current status directly or indirectly increases the individual's risk of reoffending, or engaging in antisocial behaviour. For example, if they have a need in the areas of Violent Conduct or Inappropriate Sexual Conduct, these areas can only be risk factors.
A **Protective Factor** – its current status directly or indirectly reduces the individual's risk of reoffending, or engaging in antisocial behaviour. For example, if their family is motivated to engage in the ICM process and actively support

the individual in working towards not reoffending in the future, this would be a protective factor. A **General Need** – the area does not appear to directly increase or reduce the individual's risk of reoffending, but the individual has expressed an interest in completing an intervention or undertaking some kind of activity. For example, this could include someone completing a module in education to further an interest, or someone undertaking a smoking cessation intervention.

- Identifying whether the factor is:

Relevant – Aspects of the offender's personal, inter-personal and environmental context that cause, contribute or increase the likelihood of the person reoffending. A relevant risk factor is one that contributes to or maintains the behaviour of concern.

or

Critical – A critical risk factor is one that is central to occurrence of violent or sexual offending. They may be 'triggers' for the offending, for example, several relevant risk factors may be functioning, but offending does not occur until a further factor is active. This would be a critical risk factor.

As a general rule:

- Each relevant risk factor will be linked to at least two risk management activities.
- Critical risk factors may well be linked to three or four of the risk management activities.

  This is particularly the case with offenders deemed at risk of committing an offence that would cause serious harm.

- Identifying **Early Warning Signs**

  The RMA Risk Management Standards and Guidelines document defines Early Warning Signs as those noticeable behaviours, events and other indicators that might provide staff and others who come into contact with the offender (the family, agencies etc.) with an indication that the person is entering into a period of critical risk. These signs, which warn those involved in the management of the offender that offending might be imminent,

can be utilised as an opportunity to intervene in an effort to prevent the deterioration or take other action to protect victims.

- Outlining appropriate considerations or actions under the following categories

  Supervision - Owing to the intrinsically restrictive nature of custody, the process of supervision will have a fundamentally different approach in custody than in the community. In a custodial setting, this will most likely relate to institutional security, requirements for physical location, arrangements for escorts, ground access etc. Most often this constitutes the context within which other risk management activities will take place.

  In a community setting, supervision has developed a dual focus of promoting rehabilitation and reducing harm, through restricting liberty as necessary, and engaging an offender in the process of change. In the case conference setting, the community social worker should take the lead in outlining the appropriate components of supervision post-release. Supervision ensures that the offender fulfils the obligations required of them by dint of the fact they are the subject of a legal order or licence. Supervision will involve regular and frequent meetings with the offender and other individuals as appropriate. It will also include regular reviews of the offender's case. Psycho-social, psychological and structured approaches/techniques are common components of work with offenders through supervision.

  Monitoring – this can overlap with supervision, insofar as a supervision task will always be to monitor the level of compliance and progress with the various interventions. Monitoring also includes the arrangements for maintaining up-to-date information about the offender's whereabouts and routines. This will include gathering information from the individual concerned, but will most likely also involve confirmation from other third party sources. Monitoring may well involve a degree of engagement and rapport, with the purpose of identifying changes in individual and situational factors that might increase the likelihood of risk of harm to others so that management strategies can be revised as appropriate. This will closely

link in to the concept of Early Warning Signs (described above) in terms of directly observed behaviours, as well as other monitoring processes, such as electronic monitoring, drugs testing, home visits etc.

Treatment/Interventions – this is likely to chiefly consist of counselling, one-to-one work, skills-orientated groupwork or offending behaviour programmes: treatment may also include the provision of medical care. A range of interventions is currently on offer both in the prison service and in the community. There may sometimes be a need to explore possible input from other external agencies, for example, for offenders in custody who have a problematic gambling behaviour. Where it does not appear possible to access an intervention to address risk or needs highlighted by the process, a referral should be made to the Risk Management Group. It may be useful to note that "accredited programmes" are defined as a ..."planned series of activities, delivered over a specified period of time on an individual or group basis...", which have the following aspects/components[11]:

- Methods which can be demonstrated to produce positive change in dynamic risk factors
- Components which are designed to meet clearly defined objectives and have shown to be effective in reducing reoffending
- An evidence-based design
- A commitment to systematic and structured provision.

- Planning for **Victim Safety**

    When planning for Victim Safety, it is important to consider all environments the offender is likely to reside in during the next reporting period, e.g. if they are due to move to a different regime, level of supervision, to the community etc. Potential victims could include anyone from other prisoners to members of staff to members of the public (both random and specific). The chief aim of

Victim Safety planning in the community is to reduce the likelihood that the offender will cause further harm to a known individual or potential victims.

- **Contingency Planning**

    Contingency Planning involves giving consideration to what obstacles could prevent the plan achieving its goals, and how to avoid/overcome these obstacles. For example, if an individual has a history of not completing interventions, it seems reasonable to raise this as a potential obstacle to them completing a proposed intervention, and to discuss with them what they can do to ensure they do so, and what staff can do to support them in this. Obstacles could include operational factors (e.g. practical obstacles, security issues), personal factors (e.g. motivation, responsivity issues), or situational factors (e.g. influence of peers, significant ongoing life events), amongst others. It follows that contingency plans require staff to stipulate what action might be necessary to deal with the breakdown in the offender's action plan, prior to this actually happening.

    Further details on all of the above can be found in the RMA's Standards and Guidelines for Risk Management (in press).

During discussions, it is important to elicit feedback from both the prisoner and the service provider with regard to progress made, outstanding areas of need, and any general concerns. The prisoner should be encouraged to identify ongoing goals for the next reporting period. However, if there is disagreement between the prisoner and service providers, or if they are not motivated to engage with a recommendation, this should be acknowledged and noted in the outcomes of the conference and, consequently, on PR2. In the event that the prisoner does not wish to engage with recommendations, a referral should be made on PR2 to remind the Personal Officer to approach them after a period of one month to continue developing their motivation to engage.

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11 Scottish Executive (2003), Scottish Community Justice Accreditation Panel: Guidelines for the Accreditation of Design and Delivery of Community Based Programmes

12.8 Pre-Release Case Conference
At **Pre-release Case Conferences**, section 4 should be completed. This allows particular focus on Licence conditions and Compliance and Breach, as follows:

Licence conditions - The Pre-release Case Conferences will discuss in detail the appropriate levels and content of Supervision, Monitoring, Treatment/Interventions, Victim Safety Planning and Contingency Planning that have been identified and the connection between the foregoing and the actual conditions on the prisoner's licence. By doing so, the prisoner will better understand what are his/her obligations post-release and what actions must be taken in order to reduce reoffending and assist resettlement in this section.

Compliance and Breach - The supervising officer should explain the level of compliance that is required from the prisoner on licence post release. The supervising officer should also make explicit the types of circumstances under which breach procedures will be intitiated (i.e. a failure to comply or the committal of a further offence/new criminal charge). It should also be stressed that the power exists to recall the prisoner to custody where it is expedient in the public interest to do so. The purpose of doing this is to make sure that the prisoner understands what is required of him/her and what the consequences will be of failing to comply, in a transparent, honest and fair way prior to release.

The prisoner's response to the above should be recorded in this section.

12.9 Disagreements and the Risk Management Group
In the event that there are disagreements between service providers regarding the action plan, a decision should be suspended and the issues taken to the line managers of the relevant service providers. If they are unable to reach agreement, they should refer the case to the Risk Management Group. However it should be stressed that every effort should be made to seek agreement at the Case Conference rather than deferring decisions to the Risk Management Group. Prisoners are referred to the local RMG when

- The ICM Case Conference is concerned that the identified action plan cannot be met from existing local resources or needs a higher level of decision/ratification.
- Life sentence prisoners prior to application for a first grant of temporary release license or move to top end or open conditions.
- Prisoners are subject to an Order(s) for Lifelong Restriction (OLR)- The RMG will ratify the risk management plan, produced at the ICM Case Conference, annually prior to sending to the RMA for approval.

12.10 Conclusions
At the end of the Case Conference, the Chair should:

- Check if there are any outstanding areas for discussion.
- Summarise all chief conclusions reached and the action plan for the next period.
- Encourage the prisoner to comment.

Once goals have been agreed with the prisoner, sequencing should be discussed, involving all parties (see item 11.3 Sequencing).

13 SUMMARY OF RESPONSIBILITIES FOR CASE CONFERENCES

	Case Co-ordinator	Prison Based Social Work	Community Based Social Work	Personal Officer	Service Providers	Prisoner
Send out the completed Risk & Needs Assessment to the Personal Officer	✔ (10.2)					
Send out invites to the core membership and all relevant service providers at least 4 weeks in advance	✔ (10.3)					
Ensure staff responsible for risk assessments are attending – if not, liaise with Psychology & Social Work for advice	✔ (10.3-10.4)					
Disclose the Risk & Needs Assessment to the Prisoner and check their understanding				✔ (10.2)		
Ensure the Prisoner understands their responsibilities as outlined on this page				✔ (10.2)		
Ensure they understand the Risk and Needs Assessment through discussion with Personal Officer						✔
Check with the prisoner whether they wish to invite family members	✔ (5.1.1, 10.3)	✔ (5.1.1, 10.3)				
Consider whether they wish their family to attend and, if so, who						✔
Liaise and discuss with prison staff whether it is appropriate to invite the family requested	✔ (10.3)	✔ (10.3)	✔ (10.3)			
Check on PR2 if the Mental Health Team have indicated that it is appropriate for them to provide information at or to the Case Conference	✔ (10.3-10.4)					
Notify Case Co-ordinator of additional invites to be sent		✔ (10.3)	✔ (10.3)		✔ (10.3)	
Prepare for the conference **(for staff, this includes checking responsivity screen on PR2)**	✔ (10.4)	✔ (10.4)	✔ (10.4)	✔ (10.4)	✔ (10.4)	✔ (10.4)

NB: The numbers in brackets refer to the paragraphs in this section that outline the tasks, in more detail.

	Case Co-ordinator	Prison Based Social Work	Community Based Social Work	Personal Officer	Service Providers	Prisoner
Submit written reports where attendance is not possible				✔ (10.3-10.4)	✔ (10.3-10.4)	
Record outcomes of the conference, transfer them onto PR2 and send a copy to all involved agencies, particularly CBSW	✔ (10.7)					
Provide the prisoner with a copy of the outcomes of the conference, and the form under Annexe H for their comments				✔ (10.7)		
Notify Personal Officer if they have any queries about the record of the outcomes, and make a note of any comments on the accompanying form						✔
Notify Personal Officer if they have any queries or disagreements with the outcomes recorded						✔
Personal Officer to pass on feedback to Chair of Case Conference				✔ (10.7)		
Notify Chair if they have any concerns/ disagreements with the outcomes recorded	✔ (10.7)	✔ (10.7)	✔ (10.7)	✔ (10.7)	✔ (10.7)	
In the event that community staff are unable to attend, record this along with the reason in the casefile, to be countersigned by the line manager			✔ (10.1)			
In the event that community staff are unable to attend, record this along with the reason on PR2	✔ (10.1)	✔ (10.1)				

NB: The numbers in brackets refer to the paragraphs in this section that outline the tasks, in more detail.

14. COMMUNITY INTEGRATION PLAN

The Community Integration Plan (CIP) is the document that exists in both electronic and hard copy format that contains all relevant information with regard to an individual case file. The CIP will be a screen within the PR2 system that will comprise various screen canvases.

All agencies involved in the case management process will record all relevant information in the appropriate area of the screen, including:

• quality free text information,
• all referrals made,
• assessments made,
• all activities attended or listed for,
• and outcomes of the activities.

For prisoners on the enhanced process, it is the responsibility of the Case Co-ordinator and Prison Based Social Worker to check that all relevant information has been recorded on PR2, particularly when conducting Annual Risk & Needs Reviews.

In addition to this, there are also a Risk Assessment and Reports screen and a Case Conference screen. This will provide the opportunity for all risk assessments and Case Conference minutes to be stored electronically in their parent format. This then provides a document management system that meets the requirements of the Data Protection Act (1998).

The concept of the CIP is to provide a single point of information sharing for all agencies to access, update and utilise the information available to enhance the case management process. This will provide the opportunity for real time information to be available to all.

The format of the CIP has been adapted to increase suitability for the diverse range of service providers to provide a consistent approach for action planning and case management. This replaces existing processes, such as Addictions Treatment Care Plans and Individual Learning Plans.

The CIP within PR2 has the functionality to print a hard copy Community Integration Plan that can also be emailed to relevant service providers in the community, where appropriate.

15. CONFIRMATION OF RELEASE DATE AND POST RELEASE SUPERVISION

15.1 Pre-Release Planning

The National Standards for Throughcare note the importance of pre-release planning once the prisoner's release date is known,

"Confirmation of the prisoner's release date will, in most cases, be the trigger for more detailed planning for release. It marks the start of final period of custody and imminent beginning of the post release supervision. It also marks the start of a more intensive period of involvement by the nominated supervising officer in the community". (Para 109)

This principle remains true for those prisoners who are going through the enhanced ICM process.

As noted earlier, the ICM Pre-release Case Conference is scheduled to take place three months prior to the prisoner's release[11]. It has been set for at this point in order to allow all the agencies sufficient time to engage with other service providers and plan any actions necessary prior to the prisoner's eventual release from custody. The Pre-Release Case Conference should therefore not be seen as the end point of the joint activities, rather the beginning of a "transition phase" between custody and the community.

Prison based staff will have tasks which they are required to fulfil as part of the CIP (e.g. confirmation notification/referral to the MAPPA Co-ordinator in appropriate cases) as will the supervising officer. The latter's tasks may include the following:

• visiting/liaising with the family to confirm the prisoner's release address
• ensuring that any referrals to community based services (e.g. accommodation providers, addiction counselling/treatment services) are being actively processed and confirming progress
• liaising with other departmental colleagues (e.g. in relation to Schedule 1 offenders)
• confirming the post release supervision arrangements with the prisoner
• playing a part alongside prison based colleagues in motivating the offender to co-operate with the CIP and supervision

It is imperative that any last minute changes to the Community Integration Plan are properly processed. This places a responsibility on all the relevant agencies to consult with each other, share information, agree what actions may be necessary and who will be responsible for carrying these out. It is also worth restating that the process relating to drawing up pre-release and supervision plans should be undertaken as far as possible not withstanding the level of co-operation from the prisoner.

On release, the prisoner's level of contact with the supervising officer, the nature of that contact and the programmed work/interventions in which they will be required to participate will be determined by the following factors:

(1) the level of risk that the prisoner poses
(2) the prisoner's assessed needs and
(3) the specific requirements of the licence/order to which they are subject[12].

15.2 Post Release

The ICM process effectively ends with the prisoner's release from custody, though clearly it begins again if the prisoner is recalled. The supervising officer continues to have a significant role to play following the prisoner's release and he/she becomes central in the management of the prisoner's licence in the community. In many instances this will be the culmination of – and continuation of - years of preparation and repeated assessment of risks and needs.

The initial period following release will be a testing one for the offender, and possibly for his/her family. Notably, the prisoner may be unclear or concerned about the conditions of their licence. The supervising officer can assist the prisoner by explaining clearly what is expected and what the consequences might be for the offender if he/she fails to meet these obligations (e.g. a failure to comply with the supervising officer's instructions or the committal of a further offence could lead to the prisoner's recall to custody).

Reintegration in to the community after a period of incarceration requires the prisoner to adapt to new and potentially unfamiliar surroundings   It is

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12. Prison based staff will be able confirm the prisoner's exact date for release.

13. This is in recognition of the fact that there are differing minimum standards for Extended Supervision Orders, Supervised Release Orders and Parole/Non Parolees

important to ensure that sufficient attention is paid to the practical needs of the offender at this time. Those needs will often be especially acute following lengthy periods in custody or where the offender is returning to particularly isolated or vulnerable circumstances. Community based resources (both statutory and voluntary) may be required to assist the prisoner's reintegration.

The ICM process helps address the above noted concerns prior to the prisoner's release. However, it is important to acknowledge that the ICM process is one part of the throughcare continuum. ICM improves the custodial process and helps identify/put in place services and interventions that may be required post release. Once the prisoner is released, the community based part of the throughcare continuum takes on more prominence. Criminal justice social work, the police, health colleagues, accommodation providers, the voluntary sector etc. will all have a part to play in ensuring that the prisoner complies with the conditions of his/her licence and resettles successfully into the community. The tasks that were undertaken whilst the prisoner was in custody via ICM – around risk assessment; planning interventions, providing assistance/treatment/ programmed interventions; risk management; review and evaluation – will be continued in this new phase post release, though added to this will be the functions that are concerned with breach and, in certain cases, the MAPPA.

Guidance on post-release supervision can be found in Chapter 6 of the National Standards on Throughcare and also in Circular No: SWSG 14/1998 (regarding Extended Sentence Orders). Guidance on the MAPPA is, as previously stated, available on the Scottish Executive's website at http://www.scotland.gov.uk/Topics/Justice/ jdcirculars/listjdcirculars.

GLOSSARY OF ABBREVIATIONS

	Full Title or Description	Pages
ADSW	Association of Directors of Social Work	6
CAART	Common Addictions Assessment Recording Tool	27
CBSW	Community Based Social Work(er)	4, 8, 21, 23, 51, 52, 62,63, 84
CIP	Community Integration Plan	4, 5, 7,8, 13-17, 19,20, 26,27, 56, 64, 65, 86
CJA	Community Justice Authority	9
CJSW	Criminal Justice Social Work	7, 9, 10, 11, 58
FCDO	Family Contact Development Officer	73
HCR-20	Historical Clinical Risk – 20	69, 78
LA	Local Authority	4, 12, 15, 20, 21, 23, 56, 73, 77, 89
LLO	Lifer Liaison Officer	26, 52
LSE	Learning, Skills & Employability	17, 58, 74, 77
LSI-R	Level of Service Inventory - Revised	25, 78, 80
MAPPA	Multi Agency Public Protection Arrangements	7, 9, 27, 56, 57, 65, 66
MDT	Mandatory Drug Test	27, 28
MHT	Mental Health Team	29, 62
MoO Act	Management of Offenders Etc. (Scotland) Act 2005	6, 9, 11, 56
NFA	No Fixed Abode	15, 46
OGRS	Offender Group Reconviction Scale	24, 78, 79, 81, 90
OLR	Order(s) for Lifelong Restriction	7, 23, 58, 61, 89
PBSW	Prison Based Social Work(er)	4, 8, 12, 16, 20, 21, 23, 27, 51, 52, 54, 62, 63, 72-73,83-85
PCL-R	Psychopathy Checklist-Revised	78, 79

	Full Title or Description	Pages
PCL-SV	Psychopathy Checklist Screening Version	79
PLSRD	Parole and Life Sentences Review Division	11
PPR	Post Programme Report	27, 36-38, 50
PR2	Prisoner Records database	5, 8, 12-19, 21, 22, 24-27, 51-52, 57, 60, 62-64, 72, 77, 83-85, 95
R&N	Risk & Needs	4, 16, 23, 26-27, 40, 51, 62, 83-86, 89, 91
RAGF	Risk Assessment Guidance Framework	25, 69, 79
RM2000	Risk Matrix 2000	23, 24, 79, 80
RMG	Risk Management Group	23, 60, 61
RSVP	Risk for Sexual Violence Protocol	79
SARA	Spousal Assault Risk Assessment	79
SARN	Structured Assessment of Risk and Needs	23, 80
SEJD	Scottish Executive Justice Department	9-11, 20, 56
SER	Social Enquiry Report	12, 22, 26, 28, 30-41
SPS	Scottish Prison Service	6-13, 20, 51, 54, 56, 57, 80
SRO	Supervised Release Order	12, 16, 65
STOP	Sexual Offender Treatment Programme	23, 80
SVQ	Scottish Vocational Qualification	31, 44
TAS	Throughcare Addiction Service	10, 18, 42
ViSOR	Violent and Sexual Offenders Register	36, 37
VPP	Violence Prevention Programme	23, 55, 80
VRS	Violence Risk Scale	23, 69, 80
YLS/CMI	Youth Level of Service/ Case Management Inventory	69, 80

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ANNEXE A

Surname:		Establishment:	
Forename(s):	Prison number:		EDL:
Date of birth:	Sentenced:		Remand:
Admission Date:		HDC Qualifying Date:	

Serving Less than 30 Days ☐

Serving 30 Days or More ☐

Long Term Prisoner ☐

Subject to Post Release Supervision ☐

CORE SCREEN

1st Review Date:	
2nd Review Date:	
3rd Review Date:	
Pre-release Review Date:	

(ALL SECTIONS MUST BE COMPLETED)

General Details

National Insurance No:	
Index Offence:	
Sentence Length:	Statutory Supervision / Monitoring:

CORE SCREEN

PSS level:	First time in custody?	Yes ☐ No ☐
Are you aware of any Outstanding Charges?		Yes ☐ No ☐
Are you aware of any Outstanding Warrants? Use notes page to record details		Yes ☐ No ☐
Are you aware of any Outstanding Fines?		Yes ☐ No ☐

Responsivity Issues

Do you have any disability that may affect you accessing services?   Yes ☐ No ☐
Please give details

Are you concerned with the ability to practice your religion or beliefs?   Yes ☐ No ☐
Please give details

Is there anything from your cultural background that you feel may cause problems
for you within Prison (language barriers etc)?   Yes ☐ No ☐
Please give details

Are you aware of any problems you may have with other prisoners whilst in prison?
Yes ☐ No ☐

Please give details

SOCIAL CARE NEEDS

1. Accommodation
What were your living circumstances before coming into prison? (please tick)

1. Owner / Occupier ☐	2. Local Authority ☐	3. Private landlord ☐	4. Living with Parents/ Family/ Friends ☐
5. Residential Care ☐	6. Supported Accomodation ☐	7. Hostel ☐	8. Homeless ☐

If answered 2, 3 or 6 above, Do you currently have a tenancy in your name?   Yes ☐   No ☐

(If yes, send Tenancy Closure referral to Internal Accommodation provider via the Social Care domain)

Were you receiving any assistance with accommodation issues before custody?   Yes ☐   No ☐

(If yes, send Previous Assistance referral to Internal Accommodation provider via the Social Care domain)

Is your intended accommodation on release the same as given on admission?   Yes ☐   No ☐

If No, please give details (City / town, district and postcode if known) – Record information on PR2 for PBSW information.

[ ]

Do you require help with accommodation issues in any of the following areas? (Please tick one of the following)

Housing Benefit ☐   Tenancy ☐   Mortgage ☐   Homeless on Release ☐

(If any of the above are selected send Information and Advice referral to Internal Accommodation Advisor via the Social Care domain)

2. Benefits and Finance

Were you in receipt of any benefits immediately before coming into prison?   Yes ☐   No ☐
(If yes, send Benefit Closure referral to Jobcentre Plus via Social Care domain)

Would you like a referral to Jobcentre Plus for benefits advice?   Yes ☐   No ☐
(If yes, send Benefits Advice referral to Jobcentre Plus via Social Care domain)

Do you have any outstanding debts and would you like any advice in dealing with debt and finance issues?   Yes ☐   No ☐
(If yes, send Debt / Finance Advice referral to relevant service provider via Social Care domain)

RESETTLEMENT NEEDS

3. Family contact during prison and on release

Were your family circumstances unstable or problematic prior to custody?　　Yes ☐ No ☐

(If yes and prisoner wishes support, send Relationships Support referral to relevant service provider via the Resettlement Needs domain)

3.1 Childcare

Do you have any childcare issues?　　Yes ☐ No ☐

(If yes and prisoner wishes support, send Childcare Issues referral via Resettlement Needs domain)

Do you have any children who are cared for by a local authority?　　Yes ☐ No ☐

(If yes, send Child under Local Authority care referral to Social Work via Resettlement Needs domain)

Is your access restricted by court order / other?　　Yes ☐ No ☐

(If yes, send Restricted Child access referral to Social Work via Resettlement Needs domain)

3.2 Contact During Custody

Are any of your visitors' disabled or have special needs, or will they have
any other issues that make it difficult to visit?　　Yes ☐ No ☐

(If yes, send Prison Access Issue referral to appropriate provider via Resettlement Needs domain)

Do you want help and support to develop and maintain contact with your
family and friends either during custody or after release?　　Yes ☐ No ☐

(If yes, send Maintain Family Contact referral to FCDO via Resettlement Needs domain)

4. Resettlement Supports

Social Work

If subject to statutory supervision please make offender aware of the need to work with the Social Work team and send Statutory Supervision referral to the Prison Based Social Work Team

Are there issues you need to discuss with a prison Social Worker?　　Yes ☐ No ☐

(If yes, send Confidential Issues referral to PBSW via Resettlement Needs domain)

Do you wish to access Voluntary Throughcare provision from social work?　　Yes ☐ No ☐

(If yes, send Voluntary Throughcare referral to prison Social Work team via Resettlement Needs domain)

4.2 Chaplaincy Support

Would you like to speak in confidence about anything to one of
the prison Chaplains?　　Yes ☐ No ☐

(If yes, send referral to Chaplaincy Support via Resettlement Needs domain)

Were you receiving any support from a church or faith community prior to custody?　　Yes ☐ No ☐

(If yes, send referral to Chaplaincy Support via Resettlement Needs domain)

4.3 Community Supports

Were you receiving support or in contact with any other community or voluntary agencies?   Yes ☐   No ☐

Do you require contact to be made with any of these agencies?   Yes ☐   No ☐
(If yes, check with most relevant internal provider for appropriate referral route)

5. Employment

If employed prior to custody, do you require assistance in maintaining your job while in custody?   Yes ☐   No ☐
(If 'yes', send Employer Contact referral to Job Centre Plus via LSE domain)

Would you like advice or assistance on getting a job on release?   Yes ☐   No ☐
(If 'yes', send Job Advice referral to relevant service provider via LSE domain)

6. Learning and Skills

Are you interested in attending or hearing more about learning/skills training when in prison?   Yes ☐   No ☐
(If 'yes' send Learning Interest referral to Learning Provider via LSE domain)

If you were involved in any qualifications/courses/skills training before coming into prison or on a previous sentence, would you like to continue with this learning?   Yes ☐   No ☐
(If 'yes', send Continuation of Learning referral to Learning Provider via LSE domain)

Do you feel you need help with working with computers, using numbers or reading or writing?   Yes ☐   No ☐
(If 'yes', send Core Skills referral to Learning Provider via LSE domain)

7. Substance Misuse

Do you have a problem with any of the following?

1. Drugs   ☐   2. Alcohol   ☐   3. Solvents   ☐

If you have answered 'Yes' to any of the above would you like to meet with a Caseworker?
                                                                                Yes ☐   No ☐

(if 'yes', and are a YOI or female offender (any sentence length) or male offender serving
31 days or more, send Substance Misuse referral to Enhanced Addictions Casework Service via Substance Misuse domain)

If you are a smoker would you like help to stop?   Yes ☐   No ☐
(If 'yes', send Smoking Cessation referral to Enhanced Addictions Casework Service
via Substance Misuse domain)

8. Offending Related Behaviour

Only complete this section if the prisoner has a sentence of at least 12 months.

8.1 Cognitive Skills / Constructs

Have you ever used offending to help you to solve your problems?   Yes ☐   No ☐

(If 'yes', move to the next question)

(If 'no', go to Section 8.2)

Would you like help to further develop your problem solving skills?   Yes ☐   No ☐

(If 'yes', send Cognitive Skills / Constructs referral to Programmes Staff via Offending Behaviour domain)

(If 'no', provide information leaflet and explain about self-referral if they change their mind in the future)

8.2 Anger Management

Have you ever been in a situation where you responded angrily and, as a result, came into contact with the law?   Yes ☐   No ☐

(If 'yes', move to the next question)

(If 'no', go to Section 9)

Would you be interested in finding out about how to manage your anger more effectively?   Yes ☐   No ☐

(If 'yes', send Anger Programme referral to Programmes Staff via Offending Behaviour domain)

(If 'no' motivation at the above question, provide information leaflet and explain about the self-referral process)

9. Additional Information

Are there any additional concerns that have not been addressed during this interview or has the prisoner evidenced any behaviours or made statements that have caused concern? Yes ☐ No ☐

Please provide details.

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If at any time during this interview the Prisoner gave you cause for concern with their behaviour or responses that would lead you to think that they may at risk of self harm or suicide then commence the Act 2 Care process by providing a safe environment, discussing this with your line manager.

ADDITIONAL NOTES

Ensure that all relevant information is recorded in the appropriate domain.

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ACTION SUMMARY SHEET

Record summary of needs in this section for transfer to PR2 including any immediate needs identified.

Social Care Domain

1. Accommodation

Tenancy Closure Referral ☐   Previous Assistance Referral ☐   Information and Advice Referral ☐

2. Benefits and Finance

Benefit Closure Referral ☐   Benefits Advice Referral ☐   Debt / Finance Advice Referral ☐

Resettlement Domain

3. Family Contact During Prison and on Release

Relationships Support Referral ☐   Childcare Issues Referral ☐

Child Under Local Authority Care Referral ☐   Prison Access Issue Referral ☐

Maintain Family Contact Referral ☐   Restricted Child Access Referral ☐

4. Resettlement Supports

Statutory Supervision Referral ☐   Confidential Issues Referral ☐

Voluntary Throughcare Referral ☐   Chaplaincy Support Referral ☐

Maintain Community Agency Contact Referral ☐

LSE Domain

5. Employment

Employer Contact Referral ☐   Job Advice Referral ☐

6. Learning and Skills

Learning Interest Referral ☐

Continuation of Learning Referral ☐   Core Skills Referral ☐

Substance Misuse Domain

7. Substance Misuse

Substance Misuse Referral ☐   Smoking Cessation Referral ☐

Offending Behaviour Domain

8. Offending Related Behaviour

Cognitive Skills / Constructs Referral ☐   Anger Programme Referral ☐

Signed (prisoner):	Date:	
Signed (interviewing officer):	PRINT:	Date:
Information Transferred to PR2 ☐	Date:	

ANNEXE B: RISK ASSESSMENT TOOLS

Historical Clinical Risk-20 (HCR-20)
Webster, Douglas, Eaves & Hart (1997)

HCR-20 uses static and dynamic factors to assess risk of violent reoffending and inform risk management plans. It looks at 10 Historical (static) Items, 5 Clinical (dynamic) Items and 5 Risk Management Items, which are used to inform case management.

For each item, the individual usually receives a coding of absent (0), partial (1) or present (2). These can be added to achieve an overall score, alongside scores for each of the categories.

Level of Service Inventory – Revised (LSI-R) *
Andrews & Bonta (1995)

The LSI-R was developed in Canada and uses both static and dynamic risk factors to calculate an overall level of risk of recidivism. It comprises a number of sections relating to criminogenic needs, and for each section there is a total score. Scores can be used to identify particular areas where the individual may benefit from support and further work.

Level of Service/Case Management Inventory (LS/CMI)
* (rating from Section 1 only)
Andrews, Bonta & Wormith (2004)

The LS/CMI was developed in response to the need to link risk assessments further to interventions, treatment and outcome monitoring. It comprises a similar initial assessment to that of the LSI-R, but then has further sections focusing on non-criminogenic needs, responsivity issues and recommendations. This allows it to adopt a greater case management focus than LSI-R.

Offender Group Re-Conviction Scale (OGRS) *
Home Office (1996) – See Copas, Marshall & Tarling (1996)

OGRS is an actuarial risk assessment based only on static risk factors. It is usually conducted by entering information onto a computer programme, which then calculates the risk of reoffending in the form of a percentage. It also provides a rating of the individual's risk of sexual or violent reoffending.

Psychopathy Checklist-Revised (PCL-R)
Hare (1991, 2003)

A clinical rating scale, the PCL-R investigates 20 areas, each of which is scored 0, 1 or 2. Occasionally items may not be scored. It provides an overall rating, which may also be divided to provide two ratings for two separate 'Factors': Factor 1 'Selfish, callous and remorseless use of others' and Factor 2 'Chronically unstable and antisocial lifestyle'.

Evidence indicates that the PCL-R can be used effectively to help predict re-offending Psychopathy is also a responsivity issue, and service providers can find information from the PCL–R assessment useful when considering how best to deliver an intervention to meet the needs of the individual.

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* Refer to page 24

Psychopathy Checklist: Screening Version (PCL:SV)
Hart, Cox & Hare (1995)

This is a brief screening version of the PCL-R, used to identify the possible presence of the construct of psychopathy. The PCL-R should be used to further assess offenders achieving a score between 13 and 17 on the PCL-SV.

The tool comprises 12 items, each of which is scored 0, 1 or 2, although again items may occasionally be omitted. Scores are added to provide an overall score, as well as scores for two separate Factors, as for the PCL-R.

Risk Assessment Guidance Framework (RAGF) *
(results from RA1 only)
Social Work Services Inspectorate, (2000),
Scottish Executive

The RAGF is a risk assessment tool that structures professional judgement to assess reconviction and risk of serious harm (McIvor & Barry, 2003). RAGF involves four sections, titled RA1-RA4. The format of some sections varies across Local Authorities in Scotland.

Typically, RA1 is based on the actuarial items used by OGRS (see above) to predict reconviction. RA2 then focuses on dynamic risk factors relevant to the reconviction risk identified by RA1. RA3 is a simple risk assessment form which helps identify the risk of harm. Individuals who are assessed as a high risk of harm trigger a more detailed risk of harm assessment using the RA4.

Risk Matrix 2000 (RM2000) *
Hanson & Thornton (2000)

RM2000 comprises two scales, one to assess risk of reconviction for sexual offending (RM2000/S) and one to assess risk of reconviction for violent offending (RM2000/V). Assessments are made on the basis of static factors only. In Scotland, the RM2000/S is more commonly used and it yields a score that will translate into either a very high, high, medium or low classification of risk.

Risk for Sexual Violence Protocol (RSVP)
Hart, Kropp, Laws, Klaver, Logan & Watt (2003)

RSVP is used to assess the risk of sexual violence. A structured risk assessment, it provides guidelines on both what risk factors to assess, as well as how to go about assessing them.

It comprises 21 items across the following categories: sexual violence history; psychological adjustment; mental disorder; social adjustment; manageability; and other considerations. Thus, it examines both static and dynamic risk factors, and places high importance on considering how to manage the risk in the future.

Spousal Assault Risk Assessment (SARA)
Kropp, Hart, Webster & Eaves (1999)

The SARA is used to screen for risk factors associated with spousal or family-related assault, with a view to assessing the risk of future violence. It comprises 20 items across the categories of criminal history; psychosocial adjustment; spousal assault history; alleged/ most recent offence; and other considerations. Thus, it examines both static (or historical) factors as well as dynamic factors. Each item is rated as either absent, sub-threshold or present.

Stable and Acute 2007
Hanson & Harris (2007)

The Stable-2007 was developed to assess change in intermediate term risk status, assess treatment needs and help predict recidivism in sexual offenders. The Acute-2007 consists of seven items and produces an estimate of risk for sexual and violent recidivism and a second risk estimate for general recidivism.

Structured Assessment of Risk and Needs (SARN)
Home Office

SARN has three separate stages, combining actuarial and structured clinical assessment procedures, and is used to assess risk, need and progress in sexual offenders. In the SPS, it is currently used as part of the assessment procedure for the STOP programmes.

The initial stage involves completing the Risk Matrix 2000 to identify risk of reoffending.

The second stage explores treatment needs by assessing 20 dynamic risk factors. Using case records, psychometric test and interview data, and information from previous interventions, each factor is assessed to be either present or absent.

Finally, post-treatment, the third stage of SARN assesses the individual's progress against each of the targets set at stage two.

Violence Risk Scale
Wong & Gordon (2000)

The VRS is completed on the basis of interview data alongside file information and other collateral. It examines 6 static factors and 20 dynamic factors to assess the risk of violent recidivism, and the heavy focus on dynamic factors allows it to identify appropriate targets for treatment as well as changes in risk over time, particularly following interventions.   In the SPS, the VRS is currently used as part of the assessment procedures for the Violence Prevention Programme.

Each factor is provided a score from 0,1,2 or 3. When combined, the resulting score represents the individual's overall risk.

Youth Level of Service/Case Management Inventory (YLS/CMI)
Hoge & Andrews (2002)

YLS/CMI is similar to the LS/CMI insofar as it is derived from the LSI-R and it comprises both a risk assessment element alongside a case management tool. It is for use with 12-17 year olds.

ANNEXE C: RISK ASSESSMENTS

Key Documents Reviewed	Reviewed By:
Date:	

Summary of Findings from Actuarial Risk Instrument (complete a separate box for each tool)

- Instrument used (e.g. RA1, OGRS) _____ Date completed _____

- Instrument completed by _____

- Result (e.g. % Rating of Recidivism Likelihood) _____

- Timeframe re above (i.e. within how many years) _____

- Where instrument permits overall conclusion to be reported in terms of low/med/high estimates, please state conclusion:

   Low   Medium   High   Other (please specify) _____

The RMA Manual rating of "sensitivity in identifying risk" for this tool: 0   3   6   9   N/A

Summary of Findings from Structured Clinical Approach (complete a separate box for each tool)

- Instrument used (e.g. RA2-4, HCR_20) _____ Date completed _____

- Name of attendee(s) formally trained in its use and interpreting the results for the meeting

   _____

- Which factors seem most related to risk: _____

The RMA Manual rating of "sensitivity in identifying risk factors" for this tool: 0   3   6   9   N/A

- Analysis of how these factors work in sequence:

- Type(s) of offences that individual seems at risk of committing.

   sexual   violent   property   other (describe) _____

- Type(s) of individuals most likely to be victimised

   male child   female child   adult male   adult female   other (describe) _____

- Scenario(s) most likely to trigger offending behaviour: _____

   _____

- Scenario(s) most likely to de-escalate offending behaviour: _____

   _____

ANNEXE D: ICM PREVIOUS CONVICTIONS INFORMATION

Current Offence Category	Violence		Sexual		Other	

Previous Convictions (do not include current convictions)

	Age at 1st Conviction	Total Convictions		Conviction with custody under 4 years		Conviction with custody of 4 years or over	
		Under 21	Over 21	Under 21	Over 21	Under 21	Over 21
Violence							
Sexual							
Other							

	Under 21	Over 21
Number of previous court appearances at which convicted		
Number of breaches of licence, order etc.		

Are there any previous convictions for Housebreaking/Opening Lockfast Places (excl motor vehicles) offences?	Yes	No

Any other information of note*:

_____

_____

_____

_____

_____

* qualitative information, such as, if there are a number of sexual offences and they are all against children, this detail should be noted here. Additionally, if there is a type of offence that dominates under 'other' offending (e.g. motor offences) or a type of offence that might require special consideration when planning interventions (e.g. fireraising), this could be noted here.

ANNEXE E - ROLE PROFILES

Links Officers (or Residential Officers responsible for Core Screen)

The Core Screen will be the first direct contact the prisoner will have with the ICM process upon entry to the prison. As such, the staff implementing the Core Screen may make a significant impression on their expectations of services and interventions available to them.

Their key responsibilities involve:

Core Screen
- Conducting the Core Screen within 72 hours of the prisoner arriving in custody.
- Ensuring that information from the Core Screen process is entered on PR2 and that appropriate referrals are made.

Case Co-ordinators

The Case Co-ordinator role within Integrated Case Management entails taking chief responsibility for ensuring the process is delivered within the set time parameters and that all relevant agencies are fully engaged in the process.

To achieve this, their key tasks include:

Risk & Needs Assessments
- Working jointly with Prison Based Social Work to collate and enter on PR2 information from file reviews and service providers in order to conduct full risk and needs assessments within the set time frames.
- Ensuring that appropriate referrals are made as a result of the Case Conference action plan, with the informed consent of the prisoner.

Case Conferences
- Working jointly with Prison Based Social Work to co-ordinate and chair Case Conferences within the appropriate timescales.
- Inviting all relevant parties, including those who are recommended by other parties, such as Prison Based Social Work.
- Ensuring all Case Conferences are minuted, and the minutes later attached to PR2.
- Ensuring all recommendations from Case Conferences are actioned, including making any referrals using PR2.

ICM Process – General
- Maintain an administrative overview, ensuring all agencies are fully engaged in the ICM process.
- Liaising with Personal Officers to ensure all the prisoner's needs are met.
- Identifying referral routes for all identified need.
- Providing reports to the ICM Co-ordinator.

Prison Based Social Work

The Prison Based Social Worker role within Integrated Case Management involves ensuring effective links are made between prison based staff and community based staff, with a view to managing risk both whilst in custody as well as upon release.

To this end, their key tasks involve:

Risk & Needs Assessments
- Ensuring information on PR2 regarding Social Work contact with the prisoner and any outcomes is up to date.
- Working jointly with the Case Co-ordinators to collate and enter on PR2 information from file reviews and service providers in order to conduct full risk and needs assessments within the set time frames.
- Ensuring that appropriate referrals are made as a result of the Risk & Needs assessments.

Case Conferences
- Working jointly with the Case Co-ordinators to co-ordinate and chair Case Conferences within the appropriate timescales.
- Notifying Case Co-ordinators of representatives from external agencies whom it would be appropriate to invite.

Service Provision
- Checking and progressing referrals to the Social Work Department on a regular basis.
- Entering information regarding contact with the prisoner and outcomes on PR2.
- Ensuring that appropriate referrals are made in response to any needs identified during contact with the prisoner.

Community Based Social Work
The Community Based Social Worker role within Integrated Case Management involves ensuring effective links are made with prison based staff (i.e. in particular, prison based social work and the ICM Case Co-ordinator), with a view to managing risk/needs both whilst in custody as well as upon release. Moreover, the Community Based Social Worker provides a valuable connection for the prisoner with the his/her community during the custodial term: importantly, in relation to the prisoner's family/others from the prisoner's social network/community based services. The Community Based Social Worker will also have specific duties to carry out in relation to the supervision of the prisoner's licence post release, making sure that the plans/work undertaken in prison – to reduce reoffending and meet specific needs – are followed through, as appropriate.

To this end, their key tasks involve:

Risk & Needs Assessments
- Ensuring that information held by community based colleagues, which may be useful in the Risk and Needs Assessment, is passed to prison based colleagues: e.g. in relation to previous risk assessments that may have been undertaken

- Providing appropriate information to prison based colleagues on work that has been progressed to address specific issues in relation to the Risk and Needs Assessment
- Providing appropriate information to prison based colleagues on contact with the prisoner's family/others from the prisoner's social network/community based services, for the Risk and Needs Assessment

Case Conferences
- Attending the Case Conference
- Providing feedback on work undertaken in the community to progress specific matters
- Providing feedback on contact with the prisoner's family/others from the prisoner's social network/community based organisations
- Notifying Case Co-ordinators of representatives from external agencies whom it would be appropriate to invite.

Service Provision
- Maintaining contact with the prisoner and their family during the custodial term
- Liaising with prison and community based colleagues/services to share information and progress specific matters
- Ensuring that plans made for the prisoner pre-release, aimed at reducing reoffending and promoting resettlement, are carried forward post release
- On release, supervising the prisoner's licence

Service Providers

Service Providers is a broad term referring to all agencies and staff who play a role in the care or rehabilitation of the offender. Whilst their work will differ within their specialist field, they all share the common goal in ICM of liaising with each other to provide a holistic, client-centred approach.

Key tasks will involve:

Risk & Needs Assessments
• Ensuring information on PR2 regarding contact with the prisoner and any outcomes is up to date.
• Providing additional information to Case Co-ordinators and Prison Based Social Workers as and when requested to facilitate the compilation of full risk and needs assessments.

Case Conferences
• Contributing to discussions concerning levels of risk and need.
• Providing feedback regarding assessments or other contact with the prisoner.
• Making recommendations for future work in their area of specialism.

Service Provision
• Checking and progressing referrals to their agency or department on a regular basis.
• Entering information regarding contact with the prisoner and outcomes on PR2.
• Ensuring that appropriate referrals are made in response to any needs identified during contact with the prisoner.

Psychology

Psychology will play the role of a Service Provider under ICM, as detailed above.

However, psychology staff will have additional duties as follows:

Training
• Providing training in Motivational Interviewing skills to Personal Officers, and other staff as appropriate.
• Ensuring the provision of training and general support to Case Co-ordinators.

Personal Officers

The Personal Officer role within Integrated Case Management differs significantly from the one detailed in Sentence Management. The new role has no direct input into formulating the initial action plan, with their main focus now shifting towards offering direct support to the prisoner and ensuring that all service providers meet the agreed outcomes of the plan through consistent monitoring.

To achieve this, their key duties will include:

Prisoner Liaison
• Motivating the prisoner to engage in the process, by promoting the benefits and periodically revisiting the prisoner, especially if their motivation to engage is low or there is risk of deselection from an intervention.
• Liaising with service providers on the prisoner's behalf to ensure the prisoner is able to access the service and that the service is meeting their needs.
• Monitoring the prisoner's progress and promoting other options in between review periods.
• Making mid-review referrals as and when appropriate.

Case Conferences

- Ensuring relevant paperwork, e.g. the Full Risk & Needs Assessment, is disclosed to the prisoner prior to and following the Case Conference and that their understanding is checked.
- Attending the Case Conference with the prisoner to support, advocate and input as required.
- Ensuring the prisoner is agreeable to the action plan.
- Supporting the Case Co-ordinator/Links staff in arranging the Case Conference.

Community Integration Plan

- Generally monitoring the CIP to ensure the action plan is being carried out as it should, and that service providers are maintaining up-to-date records of work being conducted and work planned.
- Where work is not being undertaken as planned, contacting the service providers directly, and liaising with the Case Co-ordinator if necessary.

Pre-Release

- Liaising with the prisoner prior to release to discuss any issues or concerns, and ensure they are fully aware of the consequences of failure to comply with licence.

ICM Co-ordinator

A manager within each establishment will be designated with this role to provide the local point of contact as the lead person for ICM. This role will:

- Provide a point of contact for all staff for management related ICM issues;
- Monitor performance and ensure resources are in place to meet the required outputs;
- Ensure mechanisms are in place for multi-agency review of local process;
- Ensure all staff access the appropriate training; and
- Attend national meetings to ensure consistency of approach.

ANNEXE F – REPORT TEMPLATES

Personal Officer Report

Prisoner's Name: [   ]   Prisoner Number: [   ]

Officer's Name: [   ]   Hall: [   ]

Date of Report: [   ]   Date of Case Conference: [   ]

Summary of Contact
Detail formal occasions you have met with the prisoner to discuss progress on ICM. Include:

- Dates
- Issues raised by the prisoner
- Issues raised by yourself
- Action Points from the meeting for either party
- Any additional outcomes

Note any discussions you have had with the prisoner about ICM outside of the formal process, including date and brief outline of the conclusions, e.g. 12/01/06 – informed Mr/Ms X. that I had contacted Programmes and they said they would contact him within 2 weeks.

Behaviour Report
Provide information on the prisoner's behaviour on the hall, focusing particularly on:

- **Motivation** – how motivated have they been over the reporting period with regard to a) the ICM process as a whole and b) individual interventions within the process.
- **Behaviour** – how prosocial is it, have there been any changes during the last reporting period; have you noticed them practising skills they have covered on programmes; have you noticed anything significant about their moods.
- **Significant events** – for example, changes to their ACT status or daily activities; occurrences outside the prison that have impacted on them.
- **Associates** – whom does he/she associate with on the wing; would you describe them as a prosocial influence; has this changed since the last reporting period.

Additional Information
Note anything else of significance not included elsewhere in the report.

Date report disclosed to the prisoner: [   ]

SERVICE PROVIDER REPORT

(e.g. Programmes, Work, Activities, Education etc)

Name: [   ]   Staff role/Location: [   ]

Prisoner's Name: [   ]   Prisoner Number: [   ]

Date of Report: [   ]   Date of Case Conference: [   ]

NB: add/delete sections as necessary – the following is simply to guide on some of the types of information that could prove useful to Case Conference discussions.

Background information
(To be completed by everyone)
• The capacity in which you know the prisoner
• Contact you have had with the prisoner during the last reporting period, e.g. frequency, duration, form of contact (groupwork, 1 to 1 interview etc.)
• How well you feel you know the prisoner
• Reason for providing the report to the Case Conference, i.e. what information you will be providing

Assessment Results
(Complete this section if your work with the prisoner revolved around a specific assessment.)
• Describe why the prisoner was referred for the assessment;
• Describe what the assessment is designed for;
• Detail what it involves;
• Outline the results (using language and detail appropriate to a non-expert audience)
• List when the results were discussed with the prisoner and their response to the results.

Progress Report
(Complete this section if your contact with the prisoner has been specifically goal-orientated.)
• Outline objectives set at previous Case Conference/at outset of work with the prisoner;
• Describe progress made, evidencing with examples;
• Detail outstanding objectives or areas requiring further work, evidencing with examples;
• Detail when feedback was last provided to the prisoner and their response to the feedback.

Behaviour Report
(To be completed by everyone with whatever information is available.)
• **Motivation** – how motivated have they been over the reporting period with regard to a) the ICM process as a whole and b) individual interventions within the process.
• **Behaviour** – how prosocial is it, have you noticed any changes during the last reporting period; does it differ across different situations; have you noticed them practising skills they have covered on programmes; have you noticed anything significant about their moods.
• **Significant events** – for example, changes to their ACT status or daily activities; occurrences outside the prison that have impacted on them.
• **Associates** – who does he/she associate with on the wing; would you describe them as a prosocial influence; has this changed since the last reporting period.

Additional Information
Note anything else of significance to inform the Case Conference discussions.

Date report disclosed to the prisoner: [   ]

ANNEXE G: RECORD OF OUTCOMES OF THE CASE CONFERENCE

1. Introductions
Offender Details:

Full Name: _____   Date of Birth _____

Prisoner Number: _____

Sentence Type: _____   Eg. Determinate / Life / Order for Lifelong Restriction

Local Authority Details:

supervising officer: _____   Local Authority: _____

Case Conference Details:

Date: _____   Establishment: _____

Attendees: _____   Apologies: _____ (Report sent/ No report)

Type of Case Conference: Initial / Annual / Pre release / Recall _____

Case Conference number: _____

Background information

This should include **brief** summaries of any information regarding:

- their childhood, e.g. family circumstances, whether time spent in care, mental health, offending
- their lifestyle/accommodation/relationships at time of current arrest/conviction
- their history of adulthood offending, including whether had previous custodials
- their length of sentence and EDL/PQD
- work undertaken in the past – in custody or in the community
- the current offence, including the prisoner's reflections on why they offended and how they could have avoided it, including specific skills
- the current situation with regard to relationships (visits etc.) and plans for release

Did the prisoner receive a copy and have an understanding of the Provisional Risk & Needs Assessment/ Annual Risk & Needs Progress Review and, if so, when?

Yes / No   Date: _____

If no, give details: _____

_____

_____

_____

_____

2. Risk Assessments

Key Documents Reviewed	Reviewed By:
Date:	

Summary of Findings from Actuarial Risk Instrument (complete a separate box for each tool)

- Instrument used (e.g. RA1, OGRS)_____ Date completed _____
- Instrument completed by _____
- Result (e.g. % Rating of Recidivism Likelihood)_____
- Timeframe re above (i.e. within how many years) _____
- Where instrument permits overall conclusion to be reported in terms of low/med/high estimates, please state conclusion:

    Low   Medium   High   Other (please specify)_____

The RMA Manual rating of "sensitivity in identifying risk" for this tool: 0   3   6   9   N/A

Summary of Findings from Structured Clinical Approach (complete a separate box for each tool)

- Instrument used (e.g. RA2-4, HCR_20) _____ Date completed_____
- Name of attendee(s) formally trained in its use and interpreting the results for the meeting

    _____

- Which factors seem most related to risk: _____

The RMA Manual rating of "sensitivity in identifying risk factors" for this tool: 0   3   6   9   N/A

- Analysis of how these factors work in sequence:
- Type(s) of offences that individual seems at risk of committing.

    sexual   violent   property   other (describe) _____

- Type(s) of individuals most likely to be victimised

    male child   female child   adult male   adult female   other (describe) _____

- Scenario(s) most likely to trigger offending behaviour:_____

    _____

- Scenario(s) most likely to de-escalte offending behaviour: _____

    _____

- Where the instrument produces an overall rating please record details below:

    _____

    _____

Summary of discussions about risk at the Case Conference

NB: Risk is not static, it can change over time.   Different circumstances and situations can also impact on risk. The process involves the analysis of information from a variety of sources in order to identify the likely risks that a person poses. This assessment of risk is based only on the information and sources available at the time of the Case Conference in order to focus on the resources and interventions required to reduce/manage the risk

Summary of Risk & Needs Assessment

Domain	Level of Need of Assessment/Intervention	
	Initial Case Conference Provisional rating (pre case conference) OR **Annual/Pre-release/Recall Case Conference** Previous rating (from last case conference)	Confirmed (post case conference)
Substance Misuse: Drugs	1 2 3	1 2 3
Substance Misuse: Alcohol	1 2 3	1 2 3
Learning	0 1 2 3	0 1 2 3
Skills	0 1 2 3	0 1 2 3
Employability	0 1 2 3	0 1 2 3
Social Care: Accommodation	0 1 2 3	0 1 2 3
Social Care: Finances	0 1 2 3	0 1 2 3
Resettlement Issues: Quality of relationships	0 1 2 3	0 1 2 3
Resettlement Issues: Pro-social support	0 1 2 3	0 1 2 3
Inappropriate Sexual Conduct	1 2 3	1 2 3
Violent Conduct: Anger Management	1 2 3	1 2 3
Violent Conduct: Violent Conduct	1 2 3	1 2 3
Other offending related behaviour: Problem Solving	1 2 3	1 2 3
Other offending related behaviour: Impulsiveness	1 2 3	1 2 3
Other offending related behaviour: Anti-Social Attitudes	1 2 3	1 2 3
Mental Health	1 2 3	1 2 3

Rating guidelines (refer to guidance manual for further detail):
0 – Factor seen as an asset to community adjustment **(where applicable)**   2 – Some need for improvement
1 – No evidence of immediate need for improvement   3 – Considerable need for improvement

Level of Need for Support (complete only for domains where need for support has been identified)

Domain	Provisional	Confirmed	Details

(Where a need for support has been identified, please provide details of how that need will be met, e.g. who by, how often, in what way)

3. Action Plan (Section to be repeated for each domain discussed)

a) Domain

Title:
(e.g. substance misuse, violent conduct etc)

Category: RISK FACTOR   PROTECTIVE FACTOR   GENERAL NEED
(delete as appropriate)

Relevant or Critical: (Definition to be provided by RMA)

Early Warning Signs/Behaviours to monitor:

b) Activities requested/recommended

Supervision

Summary of discussions:
(Including the prisoner's views on their need/progress, their view on the activity under discussion, feedback from the service provider, any agreed outcomes and how this activity fits in with others being planned.)

Who is responsible for overseeing this activity?

Monitoring

Summary of discussions:
(Including the prisoner's views on their need/progress, their view on the activity under discussion, feedback from the service provider, any agreed outcomes and how this activity fits in with others being planned.)

Who is responsible for overseeing this activity?

Treatment/Interventions

Summary of discussions:
(Including the prisoner's views on their need/progress, their view on the activity under discussion, feedback from the service provider, any agreed outcomes and how this activity fits in with others being planned.)

Who is responsible for overseeing this activity?

c) Victim safety planning

Could this factor impact on others, i.e. create victims, during the next reporting period?   Yes   No
If yes, detail what plans can be put into place to protect others.

d) Contingency planning

What threats are there to the success of the above activities in addessing need and reducing risk?

How can these threats be avoided/overcome?

5. Summary of Actions

Action (please record exact action or intervention required)	Tick as appropriate			By whom (record name of staff member and service provider)	With what requirements and within what timescale	Action Plan (Insert number to indicate sequencing)
	Prisoner agrees with need & motivated to proceed	Prisoner disagrees with need but agrees to proceed	Prisoner disagrees with need & declines intervention			

Additional Notes (if necessary):

_____

_____

_____

_____

* Referrals should always be made to the Personal Officer in the event that the prisoner is not motivated to engage with a referral or intervention.

NB: The chair should clarify the above information, using questions or reflective listening.

6. Conclusions

Prisoner's response to the action plan.

Outstanding issues raised by any member of the conference.

Has any information emerged during the Case Conference that service providers feel it would have been useful to have had access to beforehand on PR2?

If yes, provide details of document/information, the source of the information/author of the document and summarise any discussions around this issue to help inform future practice.

NB: Ensure the minutes are copied to all parties for confirmation, prior to being attached to PR2, and that the action plan is taken forward by making appropriate referrals on PR2.
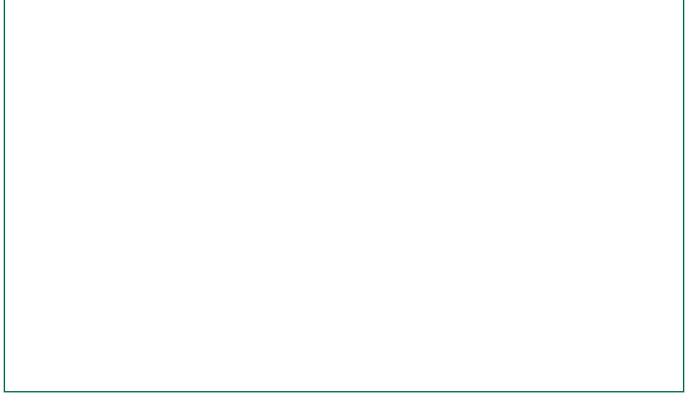
ANNEXE H: RECORD OF CASE CONFERENCE OUTCOMES

Prisoner Name: [   ]   Number: [   ]

Establishment: [   ]   Date: [   ]

Date of Case Conference: [   ]

Type: Initial [ ]   Annual [ ]   Pre-Release [ ]

Please find attached a record of the outcomes of your recent ICM Case Conference.

Please sign below to acknowledge receipt of this document. There is also space below for any comments you wish to make about the record of the discussions and outcomes. This is particularly important if you disagree with anything. You may also find it useful to discuss any disagreements with your personal officer.

Comments:

[   ]

(Please continue on a separate sheet, if necessary)

I have received a copy of the record of the outcomes of my Case Conference, and have had the opportunity to discuss it with my personal officer, or another member of staff.

Signature: [   ]   Date: [   ]

Staff signature: [   ]   Date: [   ]

ANNEXE I: ICM CASE CONFERENCE AND PAROLE DOCUMENTATION TIMESCALES

Sentence	Initial CC	Annual CC	PQD	Action prior to PQD for parole documentation	Pre release CC	EDL
6 months	ASAP	N/A	N/A	N/A	Initial	3 months
12 months	ASAP	N/A	N/A	N/A	Initial	6 months
18 months	ASAP	N/A	N/A	N/A	1 mth EDL	9 months
24 months	Up to 6 mt	N/A	N/A	N/A	1 mth to EDL	12 months
36 months	Up to 6 mt	N/A	N/A	N/A	3 mth to EDL	18 months
4 Years	6	18	24	18 mth CC to be held and minute sent with parole documentation in place of summary	3 mth to EDL 29 mths	32 mths
5 Years	6	18 30	30	Provide 18 mth CC minute and progress review update for the 6 month period prior to the collation of parole documentation i.e period between 18 – 24 mths	3 mth to EDL 37 mths	40
6 Years	6	18, 30, 42	36	30 mth CC to be held and minute sent with parole documentation in place of summary	3 mth to EDL 45 mths	48
7 Years	6	18, 30, 42	42	Provide 30 mth CC minute and progress review update for the 6 month period prior to the collation of parole documentation i.e period between 30 – 36 mths	3 mth to EDL 53 mths	56
8 Years	6	18, 30, 42 54	48	42 mth CC to be held and minute sent with parole documentation in place of summary	3 mth to EDL 61 mths	64
9 Years	6	18, 30, 42 54, 66	54	Provide 42 mth CC minute and progress review update for the 6 month period prior to the collation of parole documentation i.e period between 42 – 48 mths	3 mth to EDL 69 mths	72

Sentence	Initial CC	Annual CC	PQD	Action prior to PQD for parole documentation	Pre release CC	EDL
10 Years	6	18, 30, 42 4, 66	60	54 mth CC to be held and minute sent with parole documentation in place of summary	3 mth to EDL 77mths	80
11 Years	6	18, 30, 42 54, 66, 78	66	Provide 54 mth CC minute and progress review update for the 6 month period prior to the collation of parole documentation i.e period between 54 – 66 mths	3 mth to EDL 85mths	88
12 Years	6	18, 30, 42 54, 66, 78 90	72	66 mth CC to be held and minute sent with parole documentation in place of summary	3 mth to EDL 93 mths	96

Pre parole progress summaries

This summary is required in addition to the last Case Conference minute if the PQD is 9 months or more from the previous Case Conference. The summary should focus solely on any actions undertaken, or not for the period following the Case Conference and prior to the date when the paperwork is submitted, usually 6 months prior to PQD.

The minute of the Case Conference will be sufficient if the Case Conference is held in the period between 9 months to 6 months prior to PQD as this fits directly with the timescales required for the collation of parole documentation.

Case Co-ordinators will make the Case Conference aware that the PQD will trigger prior to the next Case Conference being held to ensure that the action plan focuses on issues that need to be addressed prior to release and issues that will be addressed post custody.