

Nottinghamshire Youth Justice Service

Case Management and Supervision Policy

1. Case Management Meetings

1.1 Case Management Meetings (CMM) replace:

- Risk Strategy Meetings
- Bail Strategy Meetings
- Re-offending Review Meetings
- ISS Reviews
- Compliance Panels
- Release from Custody Community Review
- MAM for Significant Events

1.2 Child /Young Person and Parent/Carer input into Case Management Meetings

- CMM to Review RoSH/SaW Case Manager (CM) to ascertain child/young person and parent/carers view of risk prior to the CMM.
- CMM regarding Bail, ISS, and Release from Custody Community Review -CM
 to ask child/young person and parent/carer if they wish to attend, and if not, to
 ascertain their views prior to the CMM and represent those views at the
 meeting.
- CMM due to re-offending CM to ask child/young person and parent/carer if
 they wish to attend and if not, Team Manager (TM) /Advanced Practitioner (AP)
 to ascertain their views prior to the CMM and represent those views at the
 meeting.
- CMM for non-compliance TM/AP to meet with the child/young person and their parent/carer to discuss non-compliance.

1.3 Timescales for Case Management Meetings

CMM for Bail strategy – to be held before bail application

- CMM for ISS Review to tie in with CMM to review RoSH and SaW. N.B. The
 Intervention Plan should still be reviewed monthly with the child/young person
 and their parent/carer.
- CMM for compliance As per the enforcement policy guidance, of making a
 decision regarding breach within 10 Working days, the CMM for compliance will
 need to take place within 10 working days from the date of the failure to attend/
 unacceptable behaviour. The CM should provide a condensed compliance
 report (see Appendix B) to the TM/AP at least 24 hours prior to the CMM.
- CMM for release from Custody Review within one month of release date.
- CMM to review Re-offending
 - where a PSR has been requested this should take place prior to the sentencing date to assist with the PSR proposal.
 - Where the child/young person has received a new order without PSR then the CMM should take place prior to completion of the Review Asset+ (within 15 working days of sentence).
- CMM for Medium, High or Very High RoSH/SaW every 11 weeks with one week for CM to update AssetPlus post CMM.

NB: Actions from CMM's should be entered on CAPITA in an Event within 48 hours, and minutes should be completed within five working days, on the CMM Record (see appendix A)

1.4 Combining meetings to review RoSH/SaW where the child /young person is open to CSC as well as YJS

• Medium, High, or Very High RoSH

Where CSC meeting falls within 11-week review window,

- TM or AP to attend CSC MAM alongside CM and retain accountability for the oversight of risk. RoSH/LoR matters would need to have discrete and full discussion which would need to be facilitated through advanced discussion with the Chair, providing reassurance that the RoSH/LoR discussion would be protected.
- Discuss risk of serious harm, with child/young person and parent/carers present and ask for a confidential slot if there is specific intelligence not to be shared with child/young person.

- TM/AP to document the RoSH oversight using the CMM Record (see appendix A).
- TM's may feel that they still want to hold their own YJS CMM in which case it may also be of value to more fully explore the use of Microsoft Teams to boost attendance, particularly regarding facilitating the involvement of representatives from the secure estate.
- CM to complete Review AssetPlus within five working days and send to TM/AP to be signed off.
- Intervention plan must be updated, agreed with the child /young person and their parent /carer, including the actions/interventions agreed at the CSC MAM, within five working days.

• Low RoSH but Medium, High, or very High SaW

Where CSC meeting falls within 11-week review window,

- CM to discuss with TM/AP and agree if a CMM meeting is not needed, and TM will attend CSC MAM and update CAPITA accordingly. TM/AP to put a management entry on CAPITA.
- CM to review interventions and seek the views of the child/young person and their parent/carer using the relevant self-assessment form prior to the CSC MAM.
- CM to attend CSC MAM and contribute to discussions regarding SaW as appropriate
- CM to complete Event on CAPITA detailing main points of discussion, child/young person and parent/carer views, agreed level of risk of adverse outcomes to child /young person's safety and wellbeing, rationale for this, action plan, and whether there was a need for any confidential professional only case-discussion.
- CM to complete Review AssetPlus within five working days and send to TM/AP to be signed off.
- Intervention plan must be updated, agreed with the child/ young person and their parent /carer, including the actions/interventions agreed at the CSC MAM, within five working days.

2. Supervisory Responsibilities

- 2.1 Locality Team Managers will have supervisory responsibility for Advanced Practitioners (AP's), Senior Case Managers (SCM), Case Managers (CM) and Youth Justice Service Officers (YJSO) in their teams, and their Statutory and My Future cases.
- 2.2 The South Team Manager will also have supervisory responsibility for the seconded Probation Officer and their countywide caseload, and lead responsibility for Resettlement, Transitions and Court.
- 2.3 The West Team Manager will also have supervisory responsibility for the Volunteer Coordinator, Referral Orders and Community Panel Members, and lead responsibility for NHS liaison regarding the YJS Nurse.
- 2.4 The North Team Manager will also have joint supervisory responsibility for the seconded Police Officer, Police Community Service Officer (PCSO), Police Liaison and Administrative Support (PLAS), and have the lead for Police liaison and Out of Court Disposals (OOCD).
- 2.5 The Intervention Manager will have supervisory responsibility for the Intervention Workers, Education, Training and Employment (ETE) Coordinator, Mentoring Coordinator, Part Time Youth Workers, and has lead responsibility for the Junior Attendance Centre (JAC) and My Future Support Programme.
- 2.6 The seconded Futures ETE Coordinator will have supervisory responsibility for the seconded Futures ETE Advisors.
- 2.7 The Mentoring Coordinator will have supervisory responsibility for the part time mentors.

3. Supervision of Out of Court Disposals

- 3.1 Management oversight of Out of Court Disposals will be undertaken by the Advanced Practitioner (AP) whom attends the OOCD Panel in which they are discussed, and outcome agreed, irrespective of which team/locality the AP and the child/young person are from.
- 3.2 Supervision of an OOCD case may be undertaken in person, by Microsoft teams, or by phone contact. The AP will inform the SCM/CM/YJSO of the date of the planned supervision conversation when updating on cases post OOCD panel, and it will be the CM's responsibility to contact the AP to re-arrange if this date is unsuitable.

- 3.3 The AP should provide supervision as maximum 6 weeks after the panel but can be sooner if envisaged that the intervention may be concluded earlier.
- 3.4 When OOCD cases are ready for closure the CM will email the AP who will undertake the necessary closure checks and then inform the relevant Locality Business Support Team and TM that the case can be closed.
- 3.5 AP's to ensure OOCD supervision includes:
 - OOCD been delivered and paperwork attached to CAPITA
 - Action Plan has been completed
 - Interventions are being delivered, progress, any barriers, and action to address
 - Any new issues/concerns since assessment completed
 - RoSH, SaW and LoR
 - Exit and Transition Planning
- 3.6 There is no need for TM input, unless the LoR/RoSH/SaW are High or increase to High during the intervention, and in these circumstances the AP should refer to the relevant Locality TM for their input and an agreement of whom should have continued management oversight agreed and recorded accordingly.
- 3.7 All other supervisory responsibility for the Case Manager will be retained by the Locality Team Manager. Any concerns pertaining to performance should be discussed with the relevant TM.

4. Supervision of Statutory and My Future cases held in Locality Teams

- 4.1 Team Managers will provide supervision to all Case Managers at least every six weeks.
- 4.2 Where RoSH, LoR or SaW are very high, there is a requirement for active supervision, over and above the standard 6 weekly sessions, which should be evidenced by recording of discussions and actions and close management follow-up.
- 4.3 All non OOCD Cases will be discussed in supervision and recorded on the Case Discussion Form (see Appendix D) which will be copied into an Event in CAPITA, except for:

- Cases which have been discussed in a CMM within the last month, and no significant issues or concerns have arisen. In these cases, the Team Manager will check on agreed actions, and provide an update in an Event on CAPITA.
- Newly allocated cases in which the assessment has not yet been completed /quality assured.

5. Supervision of My Future Support Programme Cases held in the Intervention Team

- 5.1 Children/young people referred to the YJS for My Future intervention will be held within the Intervention team**. The initial referral will be discussed by the Intervention TM and Locality AP/TM and where agreed as appropriate, the Intervention TM will allocate to an Intervention Worker and inform the relevant Locality AP/TM/Business Support.
- 5.2 The relevant Locality AP will have responsibility for supervision of the case including:
 - Setting date for assessment/action plan to be completed for gatekeeping
 - Gatekeeping of the initial assessment (where applicable) and or action plan
 - Providing supervision as a maximum 6 weeks after the commencement but can be sooner if envisaged that the intervention may be concluded early.
 - Agreeing closure.
- 5.3 AP's to ensure My Futures supervision includes:
 - Interventions are being delivered, progress, any barriers, and action to address
 - Any new issues/concerns since assessment completed
 - RoSH, SaW and LoR
 - Exit and Transition Planning
- 5.4 All other supervisory responsibility for the Intervention workers will be retained by the Intervention Team Manager. Any concerns pertaining to performance of an Intervention Worker should be discussed with the Intervention TM.
- ** In some cases, the child/young person may be known /have an existing relationship with a Locality Case Manager and therefore it may be more appropriate to allocate to them. My Future cases may also be held in Locality teams where there is a lack of capacity in the Intervention team to take on new cases.

6. Supervision of People

- 6.1 As part of Supervision, Team Managers will also discuss the following with staff and record on the YJS Record of Supervision (see appendix C):
 - **1. Personal Wellbeing** (including Attendance Flexi leave, Health and Safety)
 - 2. Matters Arising/Actions from Previous Supervision (non-case related)
 - **3. Performance** (including Good Practice, Areas for Improvement, Capability Procedures, and Obstacles to Effective Service Delivery)
 - **4. Training and Development** (Including facilitation of space for workers to reflect on their practice and anything that could be done differently following on from any case consultations (e.g. SLT/Clinical Psych), Learning Reviews, QA Audits etc.
 - 5. Team/Service Relationships
 - 6. Policies and Procedures
 - 7. AOB

Case Management Meeting (CMM) Record

Reason for Case Management Meeting	
Date of Meeting	
Name of Young Person	
CAPITA Number	
Attendees:	
Apologies:	
Review of actions from previous meeting: (if application)	able)
Risk of Serious Harm (RoSH (Low, Medium, High, Very High)	
Safety and Wellbeing (SaW) (Low, Medium, High, Very High)	
Likelihood of Reoffending (LoR) (Low, Medium, High, Very High)	
Details of current Intervention Plan and any progres to non-compliance this section to be completed in a of compliance report provided by Case Manager)	

Any new incidents of concern? (include any since last CMM/ AssetPlus review, and how they impact on ROSH, SaW or LoR. Have workers been pro-active in seeking out relevant intelligence/information throughout working with the young person to inform reviews?)
Have diversity and or disproportionality factors been identified/addressed? (if CMM for non-compliance, a presumption against breach should be introduced for children in care).
Eursthau information / undates from other agencies.
Further information / updates from other agencies:
How does the child/young person and their parent/ carer view their current RoSH, SaW, LoR, and the interventions being undertaken to address these? (if this is a re-offending CMM what led to the young person committing further offences? If this is a Compliance CMM, reflect TM/AP discussion with young person and their parents/carers regarding what would help them to comply).
Agreed current level of Risk of Serious Harm (RoSH): (context, imminence, likelihood)
Agreed current level of risk of adverse outcomes to child/young person's own Safety and Wellbeing: (including context, imminence, likelihood)
Agreed current Likelihood of Re-offending (LoR): (including context, imminence)
Protective /desistance factors and strengths to build on to address RoSH/ SaW/LoR

Agreed Plan /Actions (including referrals)			
Action	By whom	By when	
Date, time, and venue of next	meeting (if applicable)		

Appendix B

Compliance Report for Case Management Meeting

Name of Child Person:	or Young		CAPITA No	:
Number of app	pointments given			
Number of app	pointments kept			
Number of acceptable failures				
Number of una	acceptable failures			
			1	
Details of non	-compliance			
Date	Nature of Requiremen	t Any explanat	Any explanation given Action taker	
Details of any	unacceptable behavio	our		



Agenda 1. Personal Wellbe		
1. Personal Wellbe		
	ng (including Attendance Flexi Leave, Health a	and Safety)
2. Matters Arising/	Actions from Previous Supervision (non-case	e related)
3. Cases Discusse number)	d (list of young people who have been dis	scussed using initials and CAPIT
	cluding Good Practice, Areas for Improver	ment, Capability Procedures, a
anything that cou	relopment (Including facilitation of space for world be done differently following on from any c Reviews, QA Audits etc.)	
6. Team/Service Re	lationships	
7. Policies and Pro	cedures	
8. AOB		
Discussion Notes		

Date, Time and Place of Next Supervision:	
Date, Time and Flace of Next Supervision.	

Appendix D

YJS Case Discussion Record

Date of Case Discussion	
Initials and CAPITA number	
Manager	
Worker	
Update on actions from previous Case Disc	cussion / CMM (where applicable)
What is the young person's identity (includupon their behaviour?	ling their own awareness of it) and how is this impacting
what action has been taken to address thes	ere been any new concerns, incidents, or events, and se? (consider if these have had an impact on RoSH, SaW ive in seeking out relevant intelligence/information inform reviews?
child/young person's needs to achieve this	nd how is the current intervention plan addressing the ? (consider progress, barriers, diversity, ovision, and if any changes to the plan needed).
	It Multi Agency plan, with accountability and is the frequency of contact, agency/C&YP/parental feedback, if of other's involvement).
	ing person and how may these impact on your work with this question may depend of length of involvement prior
	ase and is there anything you would do differently in the y depend of length of involvement prior to case

Any other outstanding ac appropriate recordings be staff form completed?)	ctions required on this case? (Asset een put on MOSAIC? Troubled Fam	+ up to date? If open to CSC have ilies criteria, characteristics and risk to
Any other information /cc	omments?	
ACTIONS		
Agreed Action	Who will complete this	Date to be completed by

Effective Date: 1st October 2020

Review Date: 1st October 2021

Owner: Sarah Afolabi