Standards
& Guidelines
for Risk Management
2016

RMA

Contents

Introduction

This document presents standards and guidelines for the active and alert risk management[1] of those who pose a risk of serious harm. In addition, it provides practical guidance regarding the application of those standards in relation to individuals who are subject to an Order for Lifelong Restriction (OLR).

Its publication marks a further step towards the implementation of a shared framework for assessing and managing risk in Scotland which was established with the publication of the Framework for Risk Assessment, Management and Evaluation (FRAME).[2]

For those agencies who seek to reduce reoffending and the harm that it causes there is a growing recognition that practice can be enhanced where there is a shared understanding of risk, a consistent approach to its assessment and management, a common language with which to communicate, and a commitment to agreed standards and principles which guide practice. The FRAME principles promote the balancing of rights, a proportionate response, evidence-based practice, defensible decision making and a collaborative approach. Moreover, the application of these principles in practice extends to include the full range of individuals whose behaviour presents varying degrees of risk to themselves and others.

Building on that foundation, the Standards and Guidelines for Risk Management adopt the FRAME standards but articulate the level of assessment and management that is required to manage the 'critical few' individuals who present a considerable and ongoing risk of serious harm to others. The various elements of this document are grounded in the guiding principles, processes, language and standards which are outlined in the nationally agreed FRAME but outline the level and intensity of practice which is required to manage the most complex cases. This document assumes the application of the FRAME values and principles but for the sake of brevity, does not repeat them here.

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1 FRAME promotes consistent and proportionate practice by proposing a tiered approach in which the same standards, principles and practice process apply, but are delivered proportionate to the risk. 'Active and alert risk management' is the term applied to the approach indicated when managing those who pose a risk of serious harm. This may include adults within the criminal justice system, restricted patients and young people involved in seriously harmful offending. Risk Management Authority (2011)

2 Risk Management Authority (2011)

Overview of Content

Chapter 1 presents the Standards and Guidelines which articulate how risk management should be applied in the context of working with those who present a risk of serious harm.

Chapter 2 addresses Risk Management and the Order for Lifelong Restriction. It provides an overview of the OLR risk management planning process and guidance regarding the associated legislative and procedural requirements.

Chapter 3 provides templates for the Risk Management Plan and the annual progress record as well as guidance on their completion.

Standards and Guidelines

The RMA has a legislative function to prepare and issue guidelines as to the assessment and minimisation of risk, and to set and publish standards according to which measures taken in respect of the assessment and minimisation of risk are to be judged.[3]

Standards set a bench-mark for practice and provide a measure against which practice can be evaluated. On occasions, the findings of inquiries conducted following the commission of serious further offences have concluded that all that could reasonably be done, was done. However, on many occasions, it is found that errors of omission or commission have occurred. Such inquiry reports often highlight recurring themes including the need for:

- a constant emphasis on public protection despite the complexity of difficult cases;

- sound risk assessment involving appropriate methods used by trained and experienced staff;

- a clear link between such risk assessment and the risk management activity;

- courses of action or intervention identified as necessary, and delivered as planned;

- consistent and reliable coordination of cases;

- clarity about multi-agency and multi-disciplinary roles and responsibilities; and

- effective interagency communication and agreed shared tasks.[4]

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3 Section 5 and 6(5) of the Criminal Justice (Scotland) Act 2003

4 HM Inspectorate of Probation (2006a) (2006b); National Probation Service (2009); MAPPA Significant Case Review (2011), (2012)

In cases where failures and shortcomings are identified, these are generally attributed to individuals and/or the system in which they function, so standards must seek to address both individual practice, and wider organisational performance. Research has identified that the provision of services that are humane, ethical and clinically relevant and which conform to the principles of risk, need and responsivity can reduce rates of reoffending, while punitive approaches have little effect.[5] However, it has also been established that the organisational context in which such services are delivered can either promote or hinder their effectiveness.[6]

The standards and guidelines which follow aim to support sound individual practice within a context of effective multi-agency collaboration between the various agencies concerned. This requires that the organisational context of such service delivery is supportive and responsive.

The challenges inherent in managing the most serious and demanding cases requires a sophisticated response which targets the complex combination of risk, need and responsivity factors. This necessitates that practice is defensible, proportionate, evidence-based and collaborative.[7] Therefore, these standards and guidelines promote an approach that produces dynamic and individualised responses, derived from multi-faceted risk assessment, delivered through proportionate multiple methods within the context of multi-agency, multi-disciplinary collaboration.

The structure of the standards is designed to clarify the 'form' that is to be evident in each Risk Management Plan (RMP) and the standards and guidelines that are to be regarded. Each standard addresses an aspect of risk management practice, and lays out the following:

- the agreed standard[8]

- a set of criteria which defines the 'form'[9] that this aspect of risk management practice should take when managing risk of serious harm

- guidelines that assist in delivering this 'form' of the standard in practice.

5   Serin, R. (2006); 26 Blanchette, K., & Brown, S. L. (2006); Ward, T., Mesler, J., & Yates, P. (2007); Andrews, D. A., Bonta, J., & Hoge, R. D. (1990); Andrews, D. A., & Bonta, J. (2006); Andrews, D. A. (2001); Andrews, D. A., & Dowden, C. (2007)

6   Lowenkamp, C. T., Latessa, E. J., & Smith, P. (2006)

7   Defensibility, proportionality, collaboration and evidence-based practice are the four guiding principles of risk practice outlined in the Framework for Risk Assessment, Management and Evaluation (FRAME). Risk Management Authority (2011)

8   The Standards are are drawn from the Framework for Risk Assessment, Management and Evaluation (Risk Management Authority, 2011)

9   Section 6(3) of the Criminal Justice (Scotland) Act 2003

The Status of RMA Standards, Guidelines and Guidance

These Standards and Guidelines for Risk Management apply specifically to those who are required to prepare an RMP for persons subject to an OLR. They fulfill the legislative requirement for the RMA to set standards, issue guidelines, and to publish the form of a risk management plan.[10]

The legislation also requires that those individuals and agencies who 'have functions' in relation to a risk management plan are to have regard to such standards, guidelines and guidance.[11]

The term 'have regard to' is commonly used in relation to standard setting. It does not constitute an absolute obligation to comply but does convey a duty to give express and explicit consideration to any standard or guideline. In having regard, one must evidence a proper reasoning process that gives the standard or guideline appropriate weight and then follows it unless it is not relevant to the case or context, or is outweighed by other considerations. This can be summarised as 'comply or explain'.

Appreciating the status of the standards is important for those involved in the preparation, implementation and review of RMPs, as the legislation also stipulates that they are the measure by which practice is to be judged.[12]

Whilst the standards, guidelines and guidance apply specifically to the OLR, the standards and guidelines are consistent with FRAME and have been purposefully developed for application in any context where active and alert risk management is required. As such they have wider relevance and may be adopted by a range of agencies in Scotland. The application of the Standards and Guidelines should be informed by an awareness of legislation, national policy and relevant agency procedural guidelines.[13]

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10   Section 5 and 6(5) of the Criminal Justice (Scotland) Act 2003

11   Section 5 (2) of the Criminal Justice (Scotland) Act 2003 and Section 6 (6) of the Criminal Justice (Scotland) Act 2003

12   Section 5 (1) (b) of the Criminal Justice (Scotland) Act 2003

13   For example, all practice should be compliant with the Human Rights Act and the United Nations Convention on the Rights of the Child. Similarly, relevant guidance and legislation governing mental health practice, and child and adult protection procedures should be regarded.

Risk Management and the Order for Lifelong Restriction

The OLR is a sentence that has been available to the High Court since June 2006.[14] It provides for the lifelong management of individuals who have committed high risk violent and sexual offences. Where an OLR is imposed, the individual will be subject to an RMP both in custody (or in secure care for those managed within the mental health system) and in the community for the rest of their life.[15] The period spent in the community will be an integral part of the sentence, but before the individual can be released (or discharged) they must serve the punishment part of their sentence in prison (or hospital) and have satisfied the Parole Board that the risk they would pose in the community is manageable.[16]

The RMA was established to promote effective practice in the assessment and management of risk posed by violent and sexual offenders. Legislation gives the RMA responsibilities that are specific to the risk management of those subject to the OLR. This includes approving or rejecting RMPs prepared by the Lead Authority[17] and annually monitoring the implementation of the plan through the submission of an AIR which consists of an updated RMP and progress record.[18] The RMA may also issue guidance generally or in specific cases in relation to the preparation, implementation or review of any risk management plan.[19]

The Risk Management Plan and Annual Implementation Report

The legislation states that the RMA is to set standards and issue guidelines to which all relevant parties are to 'have regard'[20] and states that the RMA may issue guidance (either generally or in a particular case) as to the preparation, implementation or review of any risk management plan.[21]

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14   Section 1 of the Criminal Justice (Scotland) Act 2003 inserts a new section 210F into the Criminal Procedure (Scotland) Act 1995 which creates the Order for Lifelong Restriction.

15   Section 6(1)(a) of the Criminal Justice (Scotland) Act 2003 requires an RMP to be prepared in respect of any offender subject to an OLR. The RMP is to be prepared by the Lead Authority (i.e. Scottish Ministers, Hospital Managers or Local Authorities).

16   The Parole Board must direct a prisoner's release where it is "satisfied that it is no longer necessary for the protection of the public that the prisoner should be confined". (Prisoners and Criminal Proceedings (Scotland) Act 1993. Part I (2)). The Parole Board (Scotland) Rules 2001, Part II, 8 outline the matters that the Board may take into account in considering a case.

17   Section 8(4) - (6) of the Criminal Justice (Scotland) Act 2003 requires the RMA to approve or reject an RMP prepared in respect of any person subject to an OLR.

18   Section 9(2) of the Criminal Justice (Scotland) Act 2003 requires the RMA to consider an annual report on the implementation of an RMP prepared in respect of any offender subject to an OLR, and to issue directions if the Lead Authority or any person is failing in their functions in respect of the plan.

19   Section 6(6) of the Criminal Justice (Scotland) Act 2003 allows the RMA to issue guidance generally and in specific cases.

20   Section 5 of the Criminal Justice (Scotland) Act 2003

21   Section 6(6) of the Criminal Justice (Scotland) Act 2003

The legislation uses terms such as 'must' and 'comply' in relation to the preparation, implementation and review of an RMP and in doing so establishes minimum acceptable levels of practice. According to the legislation, the RMP must:

- set out an assessment of risk

- set out the measures to be taken for the minimisation of risk, and how such measures are to be co-ordinated; and

- be in such a form as is specified by the RMA.[22]

On this basis, it is required that RMPs contain an assessment of risk, outline risk management measures, and demonstrate how those measures will be co-ordinated. It is further required that they are in the 'form' specified by the RMA and have regard to the standards and guidelines published by the RMA.

The 'form' of the RMP should be distinguished from the RMP 'format' or 'template'. 'Form' refers to the aspects of, and approach to risk management planning that are specified within the standards and guidelines.[23] In contrast, Chapter 3 provides an RMP format or template which may facilitate the preparation of an RMP that meets the specified form. Utilising the RMP template is not a legislative requirement and in a forensic health context it may be more appropriate to utilise the Care Programme Approach (CPA) documentation. However, significant work has been undertaken with key justice agencies to develop and agree an RMP template which can be consistently applied across the various professional disciplines (e.g. Multi Agency Public Protection Arrangements - MAPPA).

The legislation also states that the Lead Authority is to report annually to the RMA regarding the implementation of the RMP. To facilitate the Lead Authority to provide this annual report, a progress record template is provided. As with the RMP, utilising this template is not a legal requirement.

Important Considerations

In producing these Standards and Guidelines, the RMA has made every reasonable effort to publish reliable information. While this document seeks to promote effective practice, it does not replace the need for relevant professional training and sound professional judgement. It should therefore be read and applied within the framework of existing legislative requirements, national guidance, agency procedures and organisational structures.

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22   Section 6(3) of the Criminal Justice (Scotland) Act 2003

23   Refer to the criteria on Applying the Standard which appears alongside the standards and guidelines.

The scope of this document is necessarily broad and it has been designed to apply to a wide range of individuals, whilst at the same time highlighting the requirement for an individualised approach. Within the criminal justice field, there are groups and individuals who present with distinct needs and vulnerabilities which demand a tailored response. For example, there is a large and growing body of evidence and guidance which demonstrates the need to work in a holistic and systemic way with young people who are involved in offending behaviour.[24] Such an approach should be underpinned by an awareness that children and young people are still developing and that patterns of thought and behaviour may not be fixed. As such, it is necessary to consider the wider social, emotional, physical and psychological needs of young people alongside consideration of the risk that they might pose to themselves and others. Similar considerations are required when working with women, people from ethnic minorities, and vulnerable adults such as those who have mental disorders, neuro-developmental or learning disabilities. The standard on Quality Assurance highlights the importance of ensuring that those who have responsibility for the assessment and management of risk are equipped with knowledge, skills and training relevant to their area of practice.

Whilst the consideration of need is particularly important when working with vulnerable individuals, this principle applies in all cases. This document focuses on the assessment and management of risk however, it is important to state that any assessment of risk should be grounded in an individualised consideration of the wider needs and issues which affect the person as a whole. This will help to ensure that measures to manage risk are appropriately targeted, effective and tailored to the individual.

In approaching risk assessment and management it is also necessary to consider the impact of equality and diversity issues to ensure practice does not disadvantage someone with a protected characteristic. Some protected characteristics can also be understood as responsivity factors and as such may have implications for assessment and intervention. Much of the research which underpins the development of risk assessment tools and the identification of risk factors is based on an offending population which is predominantly male and is largely drawn from North America and Western Europe. Assessors should consider the cultural and social context in which the assessment is undertaken in order to determine and understand the implications for their assessment.

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24   Scottish Government (2011) (2012); Council of Europe (2008) (2011). In addition, a range of publications which support the implementation of the Whole Systems Approach are available from the Scottish Government (www.scotland.gov.uk/Topics/Justice/crimes/youth-justice/reoffending)

Chapter 1
Standards and Guidelines

Standard 1
Risk Assessment

Risk assessment will involve identification of key pieces of information, analysis of their meaning in the time and context of the assessment, and evaluation against the appropriate criteria.

Risk assessment will be based on a wide range of available information, gathered from a variety of sources.

Risk assessment will be conducted in an evidence-based, structured manner, incorporating appropriate tools and professional decision making, acknowledging any limitations of the assessment.

Risk assessment results will be communicated responsibly, in a way that is meaningful and understood by all involved. Risk will be communicated in terms of the pattern, nature, seriousness and likelihood of offending.

Applying the Standard

An assessment underpinning a risk management plan will evidence:

- a thorough review and evaluation of information gathered from interviews, file reading, chronologies, multi-disciplinary discussion and collateral sources

- the use of appropriate risk assessment tools to provide a sound empirical basis for the identification of risk and protective factors

- detailed analysis of past and current offending in terms of its pattern, nature, seriousness and likelihood

- an offence analysis that examines how, why and when offending occurs and begins to identify the relevance of risk and protective factors in episodes of offending

- a formulation of risk that offers an understanding of the interaction and respective role of risk and protective factors in an episode of offending, and helps to identify triggers and early warning signs which may assist in recognising and responding to imminence

- an evaluation of the current level of risk of serious harm

- recognition of any limitations of the risk assessment and identification of any case specific issues that may extend beyond the boundaries of professional training, qualification and expertise

Guidelines

Risk assessment is a structured process through which an understanding or formulation of risk is reached. The goal of risk assessment is to prevent or reduce the occurrence and impact of further offending.

Risk Assessment should:

- identify the nature and seriousness of the behaviour;

- estimate its likelihood and imminence in the relevant time frame and context that is required;

- inform the level of intervention or restriction that is warranted;

- act as a foundation for a management plan and direct intervention targets; and

- communicate necessary action to others.

The depth of risk assessment that is required will be determined by the level of risk and the purpose of the assessment. However, when the purpose of the assessment is to manage and minimise risk of serious harm, the assessment should be active and alert[25], drawing on a detailed and individualised scrutiny of risk.

It is imperative that any assessment of risk is individualised and is grounded in a wider consideration of need. This applies in all cases but is particularly important when working with those who may have specific needs such as young people, women, ethnic minorities and those with learning disabilities or mental disorders. In such cases it will be important to ensure that the principles and process of risk assessment are applied in line with the evidence-base and guidance regarding effective practice with such groups.

In the context of managing risk of serious harm, the readership of the risk assessment will be multi-disciplinary and multi-agency, and each representative needs to understand the implications for their role. Understanding how the listener or reader will need to be guided by the assessment enables the assessor to communicate meaningfully. A clear and concise risk formulation that explores the scenarios that may be anticipated aids this, and enables the various parties to understand their contribution to the overall risk management plan.

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25   This term is drawn from the Framework for Risk Assessment, Management and Evaluation and denotes intensive levels of practice in complex cases where indicators of risk of serious harm are present. In less complex cases it may be sufficient to be aware or attentive to the risk

The Elements of the Risk Assessment Process

Identification

The purpose is to source, gather and review relevant information. The aim is to identify and begin to understand historical and current factors relating to the person, their life circumstances and their behaviour that support offending (risk factors); promote desistance (strengths); help to prevent episodes of offending (protective factors); or point towards social/health vulnerabilities that may or may not be related to offending (needs). This element of assessment is assisted by the development of a detailed case history or chronology, and the application of appropriate risk tools.

This should include identification of the pattern, nature and seriousness of previous and current offending: Consider:

- the pattern of offending: onset, duration and frequency

- the nature of previous and current offences: type, diversity and to whom the offences are directed

- the seriousness of previous and current offences: level of planning, and the degree of harm caused and intended

Information should be gathered from a broad range of sources which may include agency file information, interviews, third party sources (such as family), multi-agency and multi-disciplinary discussions and previous assessments of risk. The source and status of information should be made clear within assessment reports. In addition, any gaps in knowledge or inconsistencies in information should be clearly highlighted.

Analysis

The task of analysis is to break down and explore component parts in order to understand something better. An individual's offending is better understood following a detailed analysis and a risk assessment should evidence exploration of a number of key aspects:

Past and current offending in terms of its pattern, nature and seriousness. Consider:

- the extent to which the individual has already caused serious harm and the frequency and escalation of harm over time

- the type and diversity of offending

- the degree of planning and intent

- any idiosyncratic or aggravating factors such as bizarre or ritualistic elements or the use of weapons

The victims of the offences. Consider:

- demographic information such as race, gender, age and location

- particular characteristics or circumstances of victims

- the relationship to the victim (family member, person in authority, stranger)

- the range and type of victims and what this is driven by (e.g. opportunity, indiscriminate targetting, choice)

How, why and when offending occurs. Consider:

- trigger factors or antecedents to offending

- patterns of behaviour particular to this individual

- motivation, costs and rewards of offending

- the function and relevance of particular risk and protective factors in episodes of offending

- periods of non-offending and the factors influencing this

Previous response to supervision, intervention or custody. Consider:

- the individual's past response to monitoring, supervision, interventions/treatment and personal change programmes

- their level of insight and understanding regarding their offending behaviour and the harm they have already caused or may cause

- their attitude towards victims or victim groups

- their current attitude towards monitoring, supervision, intervention or treatment measures and other personal change programmes

Such attention to identification and analysis assists the development of a formulation. Having broken down the component parts within the analysis of offending, formulation serves as a means of putting those pieces back together to consider the bigger picture surrounding offending behaviour. The purpose of formulation is to provide a narrative[26] explanation of the causes of offending with the aim of identifying the most appropriate means of preventing further offending and encouraging rehabilitation.

26   Logan., C (2016) Risk Formulation: The new frontier in risk assessment and management. In D. Richard Laws & W.O'Donohue (Eds.), Treatment of Sex Offenders: Strengths and Weaknesses in Assessment and Intervention (pp. 83 - 105), Switzerland: Springer

A formulation should be a clear and concise narrative account that seeks to explain:

- the individual's pathway into offending and the historical issues which explain it's onset

- the inter or intra personal events or circumstances which precipitate episodes of offending

- the likelihood of further offending given the presence and balance of risk, strength and protective factors

- the likely outcomes in the event of such further offending, e.g. violent offending, sexual harm, fire-raising

- the likelihood, impact and possible victims of each possible outcome

- the relevance or function that various risk and protective factors have in the occurrence or prevention of seriously harmful offending

- early warning signs which might indicate that further offending is imminent

- the degree and nature of measures required to manage the identified risk/s

An assessment of risk of serious harm should outline a coherent and evidence-based risk formulation which concludes with a concise summary of the pattern, nature, seriousness, likelihood and imminence of offending. This provides the rationale for evaluation, and is the bridge which links risk assessment to risk management.

The dynamic nature of risk necessitates that assessment is an ongoing process and that the conclusions of risk assessment are subject to regular review.[27] A formulation is a hypothesis and as such should be subject to testing and review in light of new information. It is important to identify areas that require ongoing exploration, and any gaps in understanding or knowledge should be clearly acknowledged.

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27   Timescales for the review of risk assessment should be determined by the level of risk and need within each case, however for the purposes of an OLR, the conclusions of a risk assessment should be reviewed to inform each Annual Implementation Report (AIR).

Evaluation

The purpose of this step is to evaluate the formulation against the relevant decision-making criteria. This criteria will vary depending on the purpose of the risk assessment and the circumstances and context of the individual. For example, the criteria used to evaluate progression to less secure conditions within the prison environment are likely to vary from those used to evaluate an individual's suitability for release into the community.

The following definition provides broad criteria against which to evaluate the risk of serious harm:

"Risk of serious harm is defined as the likelihood of harmful behaviour of a violent or sexual nature, which is life threatening and/or traumatic, and from which recovery, whether physical or psychological, may reasonably be expected to be difficult or impossible".[28]

The task of evaluation is assisted by the definitions of low, medium, high and very high risk, provided in the MAPPA guidance [28].

Communication

When managing risk of serious harm, a shared risk management plan will serve as a primary means of communication. Regardless of the forum, risk should be communicated in a manner that facilitates understanding. Terminology should be clear and jargon free to promote collaboration and information sharing.

The findings of risk assessment should be communicated to relevant others including the individual who is subject to assessment, and key partners who are involved in the case. The formulation should be summarised into a concise statement of the pattern, nature, seriousness, likelihood and imminence of offending to aid understanding and facilitate decision-making.

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28   Multi Agency Public Protection Arrangements (MAPPA): National Guidance (2016), *The Assessment and Management of Risk,* available from http://www.gov.scot/Resource/0049/00495086.pdf

Standard 2
Planning and Responding to Change

All risk management plans and decisions will be based on a risk assessment which is of the appropriate level to support such a decision or plan. The actions to be taken will be clearly documented and their rationale will link explicitly to risk assessment.

The risk assessment and management processes will be dynamic, with the capacity to respond to changes in risk. The dynamic link between risk assessment and planning will be maintained through ongoing assessment and review.

The level and immediacy of any response to change will be proportionate to the significance of the change and risk. Reductions and increases in restrictions or interventions will be justified and supported by a suitable reassessment of risk.

Applying the Standard

When developing plans to manage and respond to changes in risk of serious harm, the following elements should be evident:

- a description of the risk(s) to be managed within the plan

- a record of:
  - relevant factors that contribute to the risk of serious harm
  - triggers, events, behaviours and early warning signs to be monitored
  - indicators of positive change

- the range of measures that will be employed to reduce the risk including:
  - preventive measures to address risk factors
  - supportive measures to build protective factors
  - contingency measures to respond to change

- co-ordination of risk management activities and strategies through:
  - prioritisation
  - scheduling
  - allocation of responsibility

- acknowledgment of limitations of the risk management activities and strategies

- arrangements for review including:
  - a schedule for planned review
  - facility for supplementary review in response to a significant change, sudden deterioration, or signs that indicate positive progress

Guidelines

The purpose of risk management planning is to identify the measures that will be taken to manage the risk of serious harm, and to co-ordinate arrangements for the implementation and review of those measures.

The risk management planning process flows from, and links explicitly to the formulation of risk. The purpose of formulation is to examine the nature, seriousness and imminence of offending and develop an understanding of how factors interact to result in an episode of offending. It creates a bridge between risk assessment and risk management, and informs the identification of measures to prevent, reduce or interrupt future occurrences of seriously harmful behaviour. However, given the dynamic nature of risk, the formulation and risk management plan should always be subject to ongoing assessment and review, and should include consideration of the contingency measures to be taken in response to anticipated or unexpected change.

A number of key steps form the risk management planning process:

1. Identification and description of the risk/s

The planning process should begin with the clear identification of the risks that are to be managed. Consider:

- the type of risk that is posed (e.g. general violence, sexual offending etc)
- the nature, seriousness, and likely or possible victims of the offending behaviour
- a forecast of the circumstances in which seriously harmful behaviour may occur

Describing the circumstances or 'scenarios' in which offending is likely to occur is a useful exercise. It helps to 'visualise' the risk/s that the plan is being designed to manage, assists in understanding the rationale for various measures and activities, and is a helpful way of meaningfully communicating risk between multi-agency partners. It also serves as a means of testing the robustness of the plan and the appropriateness of the risk management measures, and can be used to plan for current and future contexts.

The purpose of generating scenarios is not to predict offending, but to increase understanding of the risk that is to be managed. Scenarios are essentially speculative and should be clearly acknowledged as such. However, to be credible, they should be based on evidence, informed by the factors that the risk assessment and formulation have shown to be relevant, and should demonstrate the role and interaction of those factors in episodes of offending. This can provide a useful test for the formulation: if it is not possible to develop credible scenarios in which the identified factors contribute to or prevent offending, then the role of those factors should be questioned and explored.

Using this approach to explore possible situations, events and circumstances, it may also be possible to identify the factors that trigger an episode of offending. Developing an understanding of the early warning signs and other events or behaviours that may indicate that offending is imminent will inform the development of monitoring and contingency measures, although it is important to note that these signs may not be identifiable in every case.

A constructive and balanced approach to risk management planning should also focus on promoting positive change. For this reason it is important to identify and monitor events, behaviours or circumstances that might demonstrate that the plan is working or that the level of risk is diminishing.

Consideration of these elements is the first step in the planning process and is the basis for developing the necessary balance of risk management measures.

Scenario planning

Scenario planning is a technique which is well established in military and business fields to assist in planning and preparing for future possible events by hypothesising about what might occur.

The application of scenario planning to the management of risk of serious harm is evident
in a number of structured professional judgement instruments[29] and can prove a useful approach when thinking about scenarios. It involves a series of steps:

- Consideration should be given to identifying the nature, seriousness, victims, circumstances, context and time frame of offending in a number of different scenarios including:

  - a similar scenario, e.g. a repeat of previous behaviours resulting in the same or similar offending behaviour

  - a more serious scenario, e.g. an escalation in offending such as a shift from low level violence to the use of a weapon

  - a more positive scenario, e.g. desistance from offending or a reduction in the frequency, seriousness or type of offending

  - a somewhat different scenario, e.g. evidence of a change in the pattern or circumstance of offending, such as variance in location or victim targeting.

- Each scenario should be 'fleshed out' to identify and describe the most likely chain of events: If… when… then… The plausibility of the scenario should be evaluated, and if it remains a credible option, the likelihood of it occurring should be specified.

- The scenario should be analysed in order to identify the potential early warnings signs, protective factors, and risk factors.

- Suitable preventive strategies and contingency measures should be developed to avoid the negative scenarios and promote more positive scenarios. These strategies should be incorporated into a risk management plan.

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29   Hart, S. D., et al (2003); Webster, C. D.,et al (1997)

2. Development of risk management measures

Risk management measures can be understood as having three broad aims, and the planning process should ensure that consideration is given to achieving an appropriate balance of:

> Preventive measures which aim to reduce the risk of serious harm through the use of rehabilitative or restrictive activities. These activities should target the relevant risk factors and may include a broad range of interventions.

> Supportive measures which aim to promote and encourage the presence and influence of protective factors. They include activities designed to encourage internal, external, and motivational factors which might mitigate or interrupt the occurrence of seriously harmful behaviour.

> Contingency measures which aim to provide a planned and co-ordinated response to early warning signs that may indicate that risk is escalating or offending is imminent. These should be developed based on knowledge of the risk, protective factors and early warning signs and should set out clear actions to be taken in the event that early warning signs become apparent.

To ensure a proportionate response, the balance of preventive, supportive and contingency measures should reflect the nature, seriousness, likelihood and imminence of offending behaviour, and the identified risk and protective factors.

The measures should be delivered through a range of activities which should be assigned to a named individual or agency to ensure that there is clear accountability for the implementation of the plan. To aid the effective co-ordination and delivery of measures, each activity should be assigned a priority rating. In addition, time-scales should be set for the completion or review of each activity to ensure that progress is monitored and outcomes are considered.

Whilst the risk management plan should aim to be comprehensive, no plan, measure or intervention is infallible. It is therefore important that as part of the planning process consideration is given to the limitations of the risk management measures, and the plan as a whole. Limitations may relate to areas of uncertainty, gaps in knowledge, interdependencies between risk management strategies, areas where the success of the plan is dependent on the engagement of the individual, or the availability of resources or programmes. Where such limitations are identified, they should be recorded in the plan and communicated among key partners.

3. Monitoring and contingency planning

The dynamic nature of risk requires that plans are monitored and reviewed on a regular basis to identify change and measure progress. Monitoring activity should track the early warning signs, events and behaviours that might indicate that offending is imminent. However it is also important to monitor progress against the indicators of positive change to ensure that measures are not unnecessarily restrictive.

The plan should also document the contingency measures that will be taken in response to the appearance of early warning signs, the weakening or breakdown of risk management strategies or protective factors, or the emergence of other concerning behaviours or events. It should clearly outline what action should be taken to manage or minimise the risk, by whom and within what time frame. It will be important that members of the multi-agency risk management team are aware of the contingency measures so that the response to any change in risk can be implemented in a timely manner.

4. Review

Regular review is critical to the planning process. Alongside ongoing monitoring, it provides the primary means for measuring progress or deterioration against the identified risk and protective factors; identifying change; and evaluating the implementation of the risk management plan. Reviewing the plan on a regular basis will help to ensure that the identified risk(s) remain relevant and that the measures to manage the risk(s) remain proportionate and defensible. The frequency of review should be proportionate to the level of risk and should be determined on a case by case basis. Frequency of review may also be dictated by procedural requirements. For example, in an OLR case, it is likely that a review will be undertaken to inform the submission of an annual progress record alongside an updated Risk Management Plan.

The multi-agency team will be responsible for establishing arrangements for the regular review of the risk assessment and risk management plan. This should include an evaluation of the delivery of the risk management measures outlined within the plan. The multi-agency team should also ensure that mechanisms are in place to facilitate supplementary reviews in response to signs of positive progress, sudden deterioration, or a significant change.

Reviews should evaluate the effectiveness of the plan and it's implementation, identify any changes that might be required to improve the plan, highlight changes or progress resulting from the implementation of the plan, and assess whether current measures are sufficient to manage the risk and target identified needs.

For those responsible for the management of individuals subject to an Order for Lifelong Restriction, the Criminal Justice (Scotland) Act 2003 requires the Lead Authority to review the risk management plan where there has been or is likely to be a significant change. This is a formal review and is distinct from the ongoing process of monitoring and review that takes place as part of active and alert risk management.

Where the review process indicates that a change to the risk management plan is required, the rationale for this change should be clearly documented, and should be supported by a suitable reassessment of risk. This will ensure that any reduction or increase in the level of restriction or intervention is defensible and proportionate. The risk management plan should be updated to reflect any changes arising as a result of the review process.

5. Co-ordinating the Plan

The preparation and co-ordination of the plan as a whole should be undertaken by a designated Case Manager in consultation with key partners, and with the support and oversight of the multi-agency risk management team. In some instances it may be appropriate to delegate aspects of the case manager role to other staff. However, the Lead Authority should ensure that one individual is appointed to retain oversight and responsibility for the development and implementation of the RMP.

A risk management plan should set out and co-ordinate the measures needed to manage risk by detailing what needs to be done, by whom, when. This will involve prioritising, scheduling, allocating and communicating necessary actions.

In complex cases it may be necessary to co-ordinate a wide range of activities. A variety of factors may have an impact in determining how these activities are prioritised and scheduled. Consider:

- the relevance of the activity in addressing imminent offending

- the relevance for longer term risk reduction

- the current context

- the impact of anticipated change

- the impact of unplanned change

- any conditions of licence

- the individuals' readiness to change and engage

Standard 3
Risk Management Measures

Risk management measures will be based upon and updated in response to current research evidence.

Risk strategies of monitoring, supervision, intervention and victim-safety planning, and the associated activities which are used to manage the risk posed by offending behaviour will be tailored to the needs of the individual.

Measures should be proportionate to the level of risk, defensible, and consistent with the remit of the responsible agencies.

Applying the Standard

Measures to manage risk of serious harm should:

- be informed by research knowledge and grounded in the evidence base regarding effective practice

- be tailored to the individual

- comprise a balance of preventive, supportive and contingency measures

- target the specific risks, needs and scenarios identified within the risk assessment and formulation

- be delivered by means of the risk management strategies of monitoring, supervision, treatment or intervention and victim-safety planning

- be co-ordinated within a risk management plan which is shared with key partners

- be regularly reviewed to evaluate progress and ensure the ongoing appropriateness of measures

Guidelines

Where an individual poses a risk of serious harm, it is anticipated that intensive measures will be required to sufficiently manage the risk.

The measures employed should be proportionate, ensuring that any restriction of liberty is at the minimum level necessary to protect others; the provision of interventions is at the level required to promote rehabilitation; and that appropriate services are provided to meet individual needs.

To ensure that practice is evidence-based, the risk management strategies should draw on relevant research literature, should clearly link to the specific risks, needs and scenarios that were identified by the risk assessment and formulation, and should be tailored to the individual.[30]

There is growing recognition of the need to encourage the development of strengths and protective factors, as well as addressing risk factors. As research and theory in this area have developed, a distinction has emerged between factors that promote non-offending generally (strengths), and those that reduce the likelihood or impact of offending (protective factors).[31]

Strengths may be considered to be positive characteristics, relationships or circumstances that buffer risk/need factors, build resilience and promote pro-social behaviour and lifestyle. Strengths may be well-established features in an individual's life, or may be developed through support and intervention. To be considered a strength, the positive circumstance or relationship should outweigh pro-criminal influences and tip the balance towards desistance from further offending.

Protective factors also take the form of characteristics, relationships or circumstances but they act to prevent, reduce or interrupt the occurrence of an episode of offending. These factors are individualised, and what proves protective for one person may not be protective for another. Before identifying a factor as protective, the formulation of risk should demonstrate how the factor has functioned to prevent offending behaviour in the past; how it may reduce risk in the future; and should consider occasions where offending has occurred despite the presence of the characteristic, relationship or circumstance. While assessors should seek evidence of, and potential for the development of protective factors, it is important to recognise that they are not present in every case.

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30   Research evidence indicates that interventions are more successful when they are proportionate to the level of risk, focused on the primary areas that contribute to the likelihood of further offending, delivered in a manner that is responsive to the individual, and employ methods that are demonstrated to be effective. Andrews, D., and Bonta, J. (2007); Andrews, D., and Bonta, J. (2010)

31   The Structured Assessment of PROtective Factors for violence risk (SAPROF) provides a useful overview of the literature regarding protective factors (de Vries Robb, & de Vogel (2009) whilst Ward and Stewart (2003) and Ward and Maruna (2007) have considered the role of strengths in addressing offending behaviour.

Risk Management Strategies

Measures to manage risk comprise four risk management strategies: supervision, monitoring, treatment/intervention and victim safety planning. A strategy is a plan of action designed to achieve a specific goal. Each strategy may consist of a range of specific activities designed to target the identified risks and needs.

1. Supervision

The goal of supervision is to engage the individual in a process of change and oversee or administer an order or sentence in line with legislation and procedures, ensuring that any conditions or necessary restrictions are applied.

Supervision should balance the need for restriction with the goal of rehabilitation. Restrictive measures to limit freedom of association, behaviour or whereabouts are appropriate when the level of risk demands such a response. However, effective supervision involves developing a high quality relationship with the aim of encouraging compliance and promoting engagement and change. Supervision should draw on activities which are known to be effective.[32] These activities include:

- motivational interviewing;
- goal setting and problem solving;
- pro-social modelling;
- establishing legitimacy;
- effective use of authority, and
- structured one-to-one interventions that develop skills and strategies to promote pro-social alternatives and relapse prevention strategies.

2. Monitoring

Monitoring encompasses a range of observational activities and is an essential activity in the management of risk of serious harm. The goal is to assess compliance, identify progress and detect signs of deterioration or imminent offending. It is a vital source of information in the ongoing process of assessment, planning and review, and is critical in determining the need for contingency action.

For monitoring to be effective, it is important that agencies and professionals are aware of the events and behaviours to be observed. This information should be drawn from historic and current risk assessment and formulation, and the details should be clearly recorded and evidenced in the risk management plan, and communicated to relevant partners and agencies.

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32   Dowden, C., & Andrews, D. A. (2004); Andrews, D., & Bonta, J. in McNeil, F., Raynor, P., & Trotter, C. Eds. (2010)

Monitoring should focus on identifying and observing factors which might point towards behavioural or attitudinal change as well as those which remain unchanged. Although a broad range of dynamic factors might form the basis of monitoring activity, research has shown some acute dynamic factors to be indicative of increased imminence of offending behaviour. These include:

- deterioration in the level of co-operation with supervision;
- breakdown of social support network;
- evidence of hostility or affinity towards particular individuals or groups;
- substance use;
- disruption in medication;
- changes in emotional state;
- opportunities for victim access, and
- negative mood.[33]

Different contexts can pose challenges to effective monitoring. In the community there may be less opportunity to closely observe behaviour and change, whilst the restricted environment of custody can encourage compliance with routine and regimes which may create the false appearance of improved behaviour and attitudes.

Although the opportunity to engage in harmful behaviour may be limited or modified by restrictions in community or custody, there may still be evidence of 'proximal behaviours'[34] or behaviours that parallel offending[35] which might indicate that the motivation to offend is still present. Observation of these behaviours will be important in informing judgements and decisions about the need to increase or decrease risk management measures.

All parties involved in the implementation of the risk management plan have a responsibility for monitoring. Much of the information which informs monitoring will be drawn from observing behaviour during routine day-to-day interactions. However, specific activities relating to particular professional roles may include drug and alcohol testing, scheduled and unscheduled home visits and police surveillance. Agencies and individuals who are involved in managing risk of serious harm should be clear about the contingency action that will be required in the event that early warning signs appear or other concerns emerge.

33   Serin, R. C. & Mailloux, D. L. (2009)

34   Ward, T. & Beech, A. (2006); Clark, Fisher & McDougall (1993)

35   Daffern, M, Jones, L, & Shine, J., (2011)

3. Treatment/Intervention

In the context of risk assessment and management, the goal of treatment or intervention is to reduce risk and encourage rehabilitation. Treatment or intervention may seek to build a skill, improve pro-social opportunities, or address a specific behaviour, problem or need relating to issues of health, trauma or vulnerability. To ensure that interventions are defensible and effective, they should address the risks and needs of the individual identified in the risk assessment, and should serve the dual function of targeting relevant risk factors and promoting the development of protective factors and strengths. Intervention approaches should have a sound theoretical and empirical basis, and should employ methods with demonstrated effectiveness, such as cognitive behavioural techniques.

Consideration should be given to the most appropriate means of delivering treatment or intervention. This will be dependent on a number of factors including the nature of the individual's offending, their needs, characteristics and abilities, and the objectives of the risk management plan. Interventions may be delivered on an individual or group basis, and where appropriate may involve family members or others who offer pro-social support.

It is important to review the outcome of interventions to assess whether they have contributed to any change in the factors related to the likelihood or impact of further offending. Evaluation of the impact of an intervention should not be based solely on compliance or completion, particularly in a secure setting, as this may not necessarily be indicative of positive change or a reduction in the risk level.

Details relating to the scheduling of the treatment or intervention should be clearly recorded within the risk management plan and relevant tasks should be allocated to named agencies or individuals. In complex cases, where multiple interventions are required they should be prioritised and co-ordinated within the risk management plan.

4. Victim Safety Planning

The goal of victim safety planning is to reduce the likelihood of future harm to known or potential victims by devising preventive or contingency measures to protect them. It is not always feasible or appropriate to work directly with victims and victims may opt not to be involved in such discussions. However where possible, a victim safety strategy should be developed in collaboration with victims.[36]

Monitoring, supervision and intervention strategies all aim to reduce future victimisation, however, paying particular attention to victim safety planning provides a further layer of protection by ensuring that communication, information sharing, disclosure and the need for specific measures are considered from a victim perspective.

In cases where there are known victims or clearly identified individuals or groups it may be possible to identify specific strategies or actions to protect them. In other cases where offending is indiscriminate, random or opportunistic, it may only be possible to pay general attention to identifying potential victims such as staff, visitors or other prisoners.

In developing a victim safety strategy it will be important to refer to the risk formulation and identified scenarios. The information provided there will support the identification of the profile of potential or 'preferred' victim groups, and should inform the measures necessary to limit victim access. In addition, the formulation should highlight the factors, behaviours or attitudes that will require monitoring, and the early warning signs that might indicate that offending is imminent. As part of the wider planning process, consideration should be given to the development of contingency measures in the event that early warning signs emerge, or risk factors increase. However, for victim safety planning to be effective it will be vital that relevant parties:

- understand the risk;

- are aware of early warning signs;

- have contingency actions communicated to them, and

- work to provide identified potential victims with appropriate strategies and/or measures to promote their safety.

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36   The importance of considering victim perspectives is enshrined in legislation. The Criminal Justice (Scotland) Act 2003 gives victims (or an eligible family member) the right to receive information about the release of the prisoner who committed the crime against them, and to receive information from and make representations to the Parole Board for Scotland.

Standard 4
Partnership Working

The appropriate agencies will work together in the assessment and management of risk. The degree of communication, co-ordination and collaboration will be proportionate to the risk and complexities of the case.

Information will be shared responsibly, in a timely manner, using shared language which supports the understanding of those involved.

Information sharing will be at a level which is mindful of each individual's rights to privacy and confidentiality.

Applying the Standard

Active and alert risk management involves partnership working that evidences:

- the sharing of appropriate information to support risk assessment and management

- the use of shared language and agreed definitions to support clear and meaningful communication across professional disciplines

- the clear identification of individuals and agencies who have responsibilities in relation to a risk management plan, and clarity regarding their professional role and remit

- the establishment of a multi-agency, multi-disciplinary team to oversee the preparation, implementation and review of risk management plans

- the appointment of a senior manager to chair the multi-agency team to ensure clear leadership; agreed lines of governance and accountability; appropriate representation and engagement from partner agencies, and adequate resourcing of the risk management plan

- the identification of a suitably qualified Case Manager who will co-ordinate the preparation and implementation of a risk management plan

- demonstrable efforts to engage the individual in the process of risk management at all stages

Guidelines

Managing the risk of serious harm posed by individuals involved in violent and sexual offending is not the concern of one agency alone.

Each agency and professional group has a different and valuable role to play in holistic, robust and defensible risk management. Such partnership requires collaboration, the key components of which are:

- shared purpose and values;

- clearly identified goals;

- clear definition of roles and boundaries;

- communication and cooperation based on mutual respect;

- effective information exchange;

- full participation and accountability by all parties involved in the process;

- defined decision making,and

- co-ordination.

On this basis, it can be argued that the success of a partnership approach is dependent on effective communication, co-ordination and collaboration.[37]

1. Communication

Effective communication is an essential element of risk management. Whilst risk management planning and delivery involves co-ordination and collaboration, many of the day-to-day tasks will be carried out by individuals or agencies who are not directly involved in the preparation of a plan but are important to its implementation. It is therefore vital to the overall task of risk assessment and management that agencies share relevant information and communicate effectively with one another. Within agencies, those undertaking tasks should be fully aware of their contribution and their responsibilities in relation to the plan.

It is essential that responsibilities, expectations and interactions are made explicit so that agencies or members of the team understand each other's discrete and distinct role in the overall management of the individual. Mutual respect for and value of each other's roles fosters the openness, trust and co-operation that facilitate effective communication.

What information should be shared, when, and by whom will be decided on a case by case basis, however, all agencies involved in risk management should be prepared to share information relating to:

- risk factors, protective factors and early warning signs;
- health and safety considerations regarding the protection of staff, victims and the general public;
- progress, and
- concerns.

Those involved in the risk management of individuals who offend must have regard to the legislative and ethical requirements relating to the storing, processing and sharing of information. Each agency and individual will be responsible for their own compliance with the relevant legal and professional requirements regarding data protection, information sharing and freedom of information.

Ensuring effective communication requires that those involved in partnership working use clear and unambiguous language when sharing information. The use of technical jargon or profession specific terminology should be avoided wherever possible or should be clearly explained.

Every effort should be made to ensure there is a shared understanding of key terms and definitions in order to avoid misunderstandings and to support the meaningful communication of decision-making.[38]

It will be important to give consideration to the timing of communication, particularly when preparing the individual for periods of transition. The task of managing risk of serious harm dictates that plans may need to be considered well in advance which will require that information is shared with key partners at an early stage.

2. Co-ordination

The effective delivery of a risk management plan requires co-ordination of its preparation, implementation and review. This is necessary to ensure that agencies work together to deliver services and interventions, that there is a mutual understanding between professionals of their respective roles and responsibilities within a given case, that functions are allocated appropriately, and that information is communicated effectively.

As agencies work together to identify risks and needs, discuss developments, agree goals and deliver services, it is important that such inter-agency work is co-ordinated and recorded within the risk management plan and that timescales for review are clearly identified. Agreed tasks should be clearly recorded within the risk management plan and allocated to named individuals who will be accountable for reporting on any progress or concerns. The plan should set out dates for ongoing review and evaluation and should have the capacity to respond quickly and decisively to unexpected changes in risk.

There should be clear lines of responsibility and accountability to support the co-ordination of the plan. The agencies or lead authority who have responsibility for the oversight of the plan should be identified from the outset, and a Case Manager should be appointed to co-ordinate the preparation and implementation of the risk management plan. This will involve drawing together the plan; overseeing and leading the implementation of risk management measures; recording tasks, activities and decisions; communicating with colleagues; and facilitating ongoing assessment and review.

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38   The foundation for developing a shared 'language of risk' is outlined in the Framework for Risk Assessment, Management, and Evaluation: Risk Management Authority (2011)

The Case Manager should be appropriately qualified for the role and demonstrate relevant experience in managing offenders, undertaking risk assessments and delivering interventions. To ensure accountability and effective delivery of the risk management strategies, the Case Manager should co-ordinate the implementation of the RMP and the delivery of the risk management strategies, and should act as a main point of contact regarding the preparation, implementation and review of the plan.

While the Case Manager has a central co-ordinating role, it is essential that they are supported by a team and that the team is effectively led in order to promote a collaborative approach.

3. Collaboration

Risk management is a multi-agency and strategic activity, and should draw on the perspectives of all relevant parties including the victim (or their representatives), and the individual who is the subject of the risk management plan.

While effective communication and co-ordination are essential elements of risk management, collaboration is an approach that is characterised by shared purpose and values. A multi-agency team who have shared responsibility for the assessment and management of risk should respect the perspectives and skills that different disciplines and agencies bring to the process. Legitimate differences in professional values can create barriers to effective partnership[39] but a collaborative approach requires shared values therefore it is vital that any tensions are acknowledged and discussed.

The multi-agency team should be made up of representatives from a range of agencies and disciplines. It should include those who have appropriate levels of skill and expertise in the assessment and management of risk, as well as those who are empowered to make decisions regarding the resourcing of risk management strategies. The membership of the team should reflect the specific context, risks and needs of the individual and should be reviewed on an ongoing basis to ensure appropriate representation. This will be particularly important when planning for transitional phases such as a move from a secure to community setting. In such circumstances it will be important to involve relevant community partners at an early stage to ensure adequate planning and smooth transitions.

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39   William, I (2009), Stevenson, C. et al (2011)

The multi-agency team should have a clear governance structure and agreed lines of accountability. The chair of the Risk Management Team will be responsible for approving and overseeing the delivery of the strategies and goals outlined within the risk management plan, and for evaluating the progress of implementation. This individual should hold a position of sufficient seniority to enable them to make strategic decisions, hold others accountable for the delivery of agreed activities, and manage issues that are the subject of debate or dissent.[40]

Meetings of the multi-agency team will provide a formal means for communication and information sharing, but should be more than a forum for information exchange. Under the leadership of the chair, such meetings should review the current understanding of the risk, consider developments arising since the previous meeting, review actions taken, and hold partners to account for actions that are outstanding. The purpose of the meeting is to ensure that an appropriate plan for active and alert risk management is in place, and that all partners are clear about the roles and responsibilities relating to themselves and others. The frequency of multi-agency team meetings should be proportionate to the risks and needs present within the individual case.

This process should be supported by the timely production of concise, clear and accurate minutes[41], and by the incorporation of decisions into the updated plan. There should be clarity and consistency between meeting minutes, the current version of the plan, and the actions that partner agencies are delivering.

At all stages of the planning process, collaborative risk management practice should include efforts to engage the individual whose behaviour is the subject of concern. It is important that the individual has an understanding of the roles and authority of each partner; the conditions, requirements and expectations against which progress or deterioration will be judged; and the relevant legislative and procedural decision points relating to their order. Explicit efforts should be made to communicate this information in a manner, and in language which is appropriate to the individual's level of understanding. Responsibility for ensuring this occurs should be delegated and recorded within the RMP.

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40   Due to the nature of their role, some strategic managers may not have current operational knowledge and expertise. In such cases, they should draw on the expertise of appropriate colleagues to ensure that relevant information is available to inform decision-making.

41   Requirements regarding the production of minutes will vary with context. For example, MAPPA stipulates clear timescales for the production of minutes. Where such guidelines do not apply, RMT members should agree appropriate timescales.

Standard 5
Quality Assurance

Individuals responsible for assessing risk, making decisions or designing plans on the basis of risk assessments, and implementing those plans will be appropriately qualified, skilled, knowledgeable and competent to carry out this work.

Agencies will support quality assurance by establishing policies and structures, and by providing supervision and continuous professional development opportunities to staff.

Routine mechanisms will be employed to assure the quality of assessment and management practice. Self evaluation will occur at practitioner, agency and multi-agency levels to inform improvement and contribute to the evidence base.

Applying the Standard

Agencies involved in the assessment and management of risk of serious harm will give due attention to the following:

- all those involved in the assessment and management of risk are to demonstrate that they have had regard to the relevant standards and guidelines set out by the RMA

- individuals with responsibility for assessing and managing risk will demonstrate appropriate qualifications, skills, knowledge and competence

- individuals will engage in training, ongoing professional development and supervision opportunities to ensure levels of knowledge and skill remain current and are informed by the evidence-base

- individuals will adhere to agency protocols, national standards and professional guidelines relating to their area of practice

- agencies will ensure that staff are supported to fulfil their role by providing appropriate supervision and training opportunities

- agencies will establish and implement quality assurance policies, procedures and structures to ensure consistent and effective practice

- agencies will establish routine mechanisms to monitor and review practice, and measure outcomes

- multi-agency collaboration will be underpinned by agreed and documented quality assurance processes relating to decision making, reporting and review. Agencies will be responsible for ensuring that those involved are aware of the agreed protocols

- regular self evaluation will occur at the individual, agency and multi-agency level and should be used to inform ongoing learning and development

Guidelines

Quality assurance, in its broadest sense, is any action taken to prevent a compromise in quality from occurring.

In the context of assessing and managing risk this means establishing systematic processes and checks to review and evaluate the quality of risk practice. The aim is to ensure the delivery of consistent and effective practice.

The need to undertake quality assurance is not dependent on the level of risk posed by an individual or the professional role of the agency or individual involved. However as the complexity of the case increases, it is more likely that a multi-agency approach underpinned by agreed and documented quality assurance processes may be required.

1. Individual

Any individual who has a responsibility for the assessment and minimisation of risk should be appropriately qualified and skilled to carry out their role.

In each profession, the knowledge and skills required for each role are shaped and determined by job descriptions, codes of practice, national standards and guidance, and empirical evidence regarding best practice. Individuals should be aware of their role and responsibility within their organisation and adhere to the relevant codes of practice and standards which govern their profession. They should understand the limits of their role and take responsibility for ensuring that they are not working beyond their level of competence. Professionals should be aware of and comply with the policies, procedures and processes outlined by their agency and by any other multi-agency forum that is responsible for overseeing risk assessment and management in a specific case. All individuals involved in the assessment and management of risk should have regard to the relevant standards and guidelines set out by the RMA.

Those who have responsibility for risk assessment, risk management planning, decision-making and the implementation of risk management strategies should be suitably trained and able to demonstrate knowledge and competence to undertake these tasks. Practitioners working with specific offender groups should have knowledge, skills and training relevant to their particular area of practice.

Individuals should demonstrate a commitment to ongoing learning and skills development through active participation in formal and informal learning opportunities, training and supervision. Individuals should engage in critical self-evaluation and practice should be informed by the relevant empirical evidence base to ensure that knowledge remains current.

2. Agency

Organisations have a responsibility to ensure that practitioners and teams involved in assessing and managing risk of serious harm are trained and competent to prepare, implement and deliver risk management decisions and plans, and that they are supported by the necessary resources in terms of structures, support, training and guidance. It is acknowledged that senior managers who chair decision-making forums may be equipped to facilitate such groups but may not have current operational knowledge. In such cases it will be important to ensure that there is appropriate representation from staff who possess the relevant expertise.

Managers should seek to promote a culture of learning and evaluation which will encourage the continuous improvement of practice and performance. Line managers should be responsible for ensuring that staff are appropriately trained and supervised and that they are qualified and competent to undertake their role and allocated tasks. Managers should ensure that training is relevant and purposeful for the continued professional development of their staff. Supervision should ensure that staff are performing in adherence with relevant protocols and agency procedures, but should also encourage critical reflection on practice. Agencies should provide opportunities and resources to support staff in their learning.

Senior managers should be responsible for ensuring the implementation, effective functioning and ongoing evaluation of organisational policies and structures to support effective risk assessment and management procedures. Systems and processes should be transparent, clearly documented and regularly evaluated in order to support ongoing learning and improvement and measure the impact of risk practice.

Where agencies are involved in multi-agency risk practice, they should demonstrate a commitment to evaluating their role and contribution to the wider multi-agency team.

3. Multi-agency

Whilst each agency should be responsible for ensuring their own quality assurance processes, when agencies work together collaboratively, with shared responsibility for managing risk of serious harm, it will be necessary to agree certain shared quality assurance measures and mechanisms. In established forums such as MAPPA, these agreements should be in place, however in other contexts, it may be necessary for agencies to articulate and record the agreed measures, particularly in relation to the quality assurance of roles and responsibilities, decision making, the recording and communication of information, and arrangements for review. It will be important that all of those involved in multi-agency assessment and management of risk are made aware of these agreed quality assurance measures.

The risk management plan and the minutes of any multi-agency meeting should contain a clear record relating to roles and responsibilities, decisions taken, progress, and arrangements for ongoing review in order to provide a baseline against which to measure quality assurance processes.

Multi-agency teams should undertake joint evaluations of delivery to ensure that the risk management plan is appropriate and is being implemented effectively. Teams should also reflect on their communication process and evaluate the quality of their collaborative decision-making. As part of the quality assurance process, it will be important that regular consideration is given to the membership of the multi-agency team to ensure that it constitutes an appropriate range of disciplines which accurately reflects the specific risks and needs of the individual.

3. Multi-agency

Chapter 2
Guidance: Roles, Responsibilities and Process

This chapter provides practical guidance regarding the preparation, implementation and review of an RMP in respect of individuals who are subject to an OLR and is specific to the legislative and procedural requirements of that process. It begins by outlining the primary roles and responsibilities of those who will contribute to the preparation, implementation and review of the RMP. The pictorial map which follows provides an overview of the broad process, with guidance provided regarding each of the key stages.

The guidance provided is necessarily broad and focuses particularly on the assessment and management of risk. However, in applying this process, care must be taken to ensure that the broader needs of the individual are appropriately identified and addressed alongside any consideration of risk. This is particularly pertinent when working with individuals who have additional needs or vulnerabilities such as women; young people under the age of 18; ethnic minorities; those with learning disabilities or mental disorders, or individuals who have experienced trauma. In such cases it will be necessary to adhere to the relevant legislation and guidance governing practice with such groups.

Roles and Responsibilities

There are a number of key agencies and individuals who contribute to the risk management planning process.

Risk Management Authority

The Risk Management Authority (RMA) has a legislative function to ensure the effective assessment and minimisation of risk posed by individuals who offend.[42] As part of its remit, the RMA has a specific duty to administer and oversee a number of processes that are specific to the OLR sentence. This includes preparing and issuing standards, guidelines and other guidance in relation to the assessment and minimisation of risk, and in relation to the preparation, approval, implementation and review of RMPs.

Section 5 to 10 of the Criminal Justice (Scotland) Act ('2003 Act') describes the RMA's powers and duties to:

- set and publish standards, and prepare and issue guidelines regarding the assessment and minimisation of risk;

- specify and publish the form of the RMP;

- receive submissions of RMPs for approval from Lead Authorities;

- approve or reject RMPs;

- review annual reports on the implementation of the RMP;

- issue guidance as to the preparation, implementation or review of any RMP; and

- give directions (where required) regarding the preparation or implementation of an RMP.

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42   Criminal Justice (Scotland) Act, Part 1, s3(1)

The RMA can reject an RMP if it:

- is not submitted in the specified form;

- does not set out an assessment of risk;

- does not set out the measures to be taken for the minimisation of risk or outline how such measures are to be co-ordinated; or

- disregards any standard, guideline or guidance the RMA has provided.

If the RMA rejects a revised RMP and considers the time frame for the approval of a plan will not be met, the RMA can give directions as to the preparation of a revised RMP. The Lead Authority can appeal to the Sheriff on the grounds that the RMA directions are unreasonable.[43]

Lead Authority

Section 7 of the Criminal Justice (Scotland) Act 2003 states that the Lead Authority is determined by the location of the offender:

- Where the individual is detained in custody, the Lead Authority will be Scottish Ministers

- Where the individual resides in hospital the Lead Authority will be the hospital managers.[44]

- Where the individual resides in the community, the Lead Authority will be the Local Authority in whose area the offender lives.

The Lead Authority has overall responsibility for the preparation, implementation and review of the RMP and for ensuring that staff have regard to the Standards and Guidelines set out by the RMA.

Preparing the RMP

Section 8 of the Criminal Justice (Scotland) Act 2003 requires that in preparing the RMP, the Lead Authority consults with anyone who is likely to have functions under the plan and other appropriate individuals. The Lead Authority is responsible for appropriately gathering information from and sharing information with key stakeholders, and ensuring that relevant agencies and individuals are invited to contribute to the preparation of the RMP. The legislation requires that those consulted provide reasonable assistance to support the Lead Authority to prepare the plan.

The Lead Authority is to submit the RMP to the RMA for approval. If the RMA rejects the RMP, the Lead Authority should prepare a revised plan within a timescale set by the RMA.

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43   Information regarding the appeal process (Summary Application Procedure) is available from the Scottish Court Service.   www.scotcourts.gov.uk/taking-action/summary-applications

44   The definition of 'hospital managers' is outlined in the Mental Health (Scoltand) Act 1984, S125.

Implementation and Review of the RMP

The Lead Authority (and anyone to whom they have designated functions) is to implement the plan and review it on an ongoing basis. In addition, the Lead Authority is to provide an annual report to the RMA regarding the implementation of the plan and should undertake a formal review of the plan in the event that there has been, or is likely to be a significant change in the circumstances of the offender. If the RMP becomes, or is likely to become unsuitable, the Lead Authority is responsible for preparing an amended plan which should be submitted to the RMA for approval. If it is not appropriate for it to continue as the Lead Authority, a different Lead Authority (determined in accordance with the legislation) is to prepare and submit the amended plan.

Risk Management Team

The Lead Authority should appoint a multi-agency, multi-disciplinary group that has delegated responsibility for the risk assessment and management of the individual. For the purposes of the OLR process, this group is referred to as the Risk Management Team (RMT).[45] The RMT may be convened through existing structures (e.g. MAPPA, Restricted Patient Multi-disciplinary Teams etc) or may be a group convened for the specific case.

The RMT will:

- undertake an assessment of risk;

- prepare and agree the RMP and submit it to the RMA for approval;

- share the approved RMP with relevant agencies and individuals;[46]

- identify and ensure the delivery of necessary risk management strategies;

- oversee the implementation and evaluation of the approved plan;

- prepare and agree the progress record and submit it to the RMA for evaluation alongside
  an updated RMP on an annual basis.

- ensure the current RMP remains suitable or arrange for the preparation and submission to the RMA of an amended plan for approval;

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45   It is acknowledged that within the context of the Scottish Prison Service (SPS) there is an existing forum which also operates under the name of the Risk Management Team. Whilst OLR RMT meetings may be convened through this SPS forum, it should be borne in mind that the RMT convened to consider an OLR case may have a remit and membership which extends beyond that of the SPS forum.

46   Whilst it is necessary to adhere to legislation and protocols regarding the sharing of information, it will be important that the RMP is shared with those who will assume responsibility for the management of the case in the future. This will help ensure that there is a consistent and planned approach in preparing for transfer or release.

- maintain up-to-date documentation (including the RMP) ensuring that all relevant information is shared and recorded;

- evaluate the risk management strategies on a regular and ongoing basis; and

- adapt risk management strategies in light of evaluations, new information, records of concern, progress reports etc.

The membership of this group should be determined by the specific risks, needs and context of the individual who is being managed. It should also reflect the range of agencies and professionals who are involved in the risk management task. Members might come from a range of agencies and professional backgrounds, for example:

- Managers (prison, community and hospital);

- Police;

- Criminal Justice Social Work (both prison and community based representation);

- Psychologists;

- Mental Health Professionals (from community, custodial or secure care settings);

- Health Services;

- Addiction Services;

- Care Workers;

- Social Work (child protection or community care staff, or health based staff);

- Housing Personnel;

- Religious and Community leaders;

- Prison Hall Staff;

- Hospital or Secure Care Ward Staff; and

- Security Personnel (Prison and Hospital).

The membership of the group may change over time as the risk, needs and context of the individual change and evolve.

In view of the importance of considering the prior history and potential future release of the individual, representatives of community based Criminal Justice Social Work services should contribute to the development of the initial RMP and should be issued with a standing invitation to attend the RMT. This will facilitate the sharing of important information, support the development of the RMP and inform future sentence planning.

To inform the initial meeting of the Team, it may also be appropriate to consult with the author of the Risk Assessment Report (RAR), which was prepared at the time of sentencing.

As the individual moves towards release from a custodial or secure setting it is appropriate that the level of representation and input from community based agencies should increase. To facilitate effective partnership working, and to allow sufficient time for the preparation of the RMP, the RMA recommend that the process of joint planning for release should begin 2 years (but not less than 1 year) before the expiry of the punishment part or from the point at which the individual becomes eligible for progression or transfer to less secure conditions. The degree of planning required will be determined by key partners in response to the level of risk posed by the individual and the circumstances of the case. To facilitate this process, representatives from the community should be invited to attend the RMT. Community based Criminal Justice Social Work should seek to allocate a suitable individual to assume the role of community based Case Manager.[47]

The RMT will meet on a regular and ongoing basis to review the implementation of the RMP and ensure that it remains appropriate. The frequency of these meetings will be proportionate to the requirements of the case.[48] In addition, the RMT will meet as required in response to changes in the circumstances or risk of the individual.

RMT meetings should be minuted to provide a record of discussions and should clearly document decisions and action points.

The Head of the Risk Management Team should chair the RMT meetings.

Head of the Risk Management Team

The Head of the Risk Management Team should be a senior manager within the Lead Authority and will provide the strategic oversight for the management of individuals who are subject to an OLR on behalf of the Lead Authority. In addition, they should be in a position to allocate resources to support the implementation of the RMP.

The Head of the Risk Management Team should assume the role of facilitator, leader and decision-maker to ensure that RMT meetings operate effectively and efficiently. They will be responsible for:

- ensuring the appropriate representation and engagement of key partners
- chairing and facilitating RMT meetings
- ensuring that a minute of the RMT is recorded and circulated within agreed timescales

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47 It is acknowledged that a community based Supervising Officer will already have been identified within 21 days of sentence, as per the requirement to do so outlined in the ICM Guidance Manual (Scottish Prison Service, 2007, p12).
    It will be for Local Authorities to determine whether it is appropriate for the identified Supervising Officer to assume the role of OLR Case Manager.

48 The RMT will be required to meet at least once a year to prepare and agree the content of the AIR.

- reviewing and establishing agreement regarding RMPs

- ensuring the RMT considers a full analysis of the risk of serious harm to identify the risks

- ensuring that the RMT implement the identified risk management strategies and activities as outlined within the RMP, and in line with their professional role and competence

- ensuring that decisions are taken to address any obstacles to the delivery of the RMP

- ensuring uninterrupted service provision in the absence of key individuals

- ensuring that legislative timescales are met regarding the submission of RMPs and AIRs

- ensuring that the RMP is regularly reviewed as part of ongoing case management

- appointing a Deputy Case Manager to cover any absence of the Case Manager

Case Manager

The Lead Authority should appoint a Case Manager. Supported by the RMT, the Case Manager will co-ordinate the preparation and implementation of the RMP, and the delivery of the identified risk management strategies. They will be responsible for communicating and recording information regarding the plan. The Case Manager has a core role in ensuring that members of the RMT work collaboratively to prepare and deliver the RMP appropriately.

The Case Manager has a pivotal role in the risk management of individuals who are subject to an OLR and Lead Authorities should ensure that the person appointed to this role is appropriately qualified, skilled and competent. A Case Manager should:

- have excellent communication and organisational skills;

- have experience of working collaboratively within a multi-agency, multi-disciplinary context

- have sound knowledge, skills and training in assessing risk of serious harm;

- be experienced in managing violent and sexual offenders;

- be empowered to make decisions regarding the case in the context of the RMP; and

- be accountable to the RMT.

The Case Manager will:

- facilitate the preparation of the RMP, including the gathering and exchange of information relating to the RMP;

- co-ordinate the implementation of the RMP and the delivery of the risk management strategies;

- maintain and update the RMP in response to any changes, and ensure that information concerning the RMP is effectively recorded (including any obstacles to the delivery of the plan);

- establish arrangements to ensure that information regarding the plan is effectively communicated between the Lead Authority and other agencies; and

- be the central point of contact for all those involved.

The Case Manager role is particularly crucial where the individual is being transferred from one Lead Authority to another. In such circumstances, it will be necessary to jointly review and update the RMP in preparation for transfer and it will fall to the Case Manager to facilitate and co-ordinate this process. It is acknowledged that aspects of the case manager role may be delegated to others, however, it is important that one individual is appointed to retain oversight of the coordination and delivery of the RMP.

Those with functions under the plan

The Criminal Justice (Scotland) Act 2003 section 6(4) states that an RMP can make provision for any person who might reasonably be expected to assist in the minimisation of risk to have functions in relation to the implementation of the plan. This includes, but is not limited to Local Authorities, police, health and prison services.

In preparing an RMP, the Lead Authority is required to consult with anyone on whom it is considering conferring functions. The legislation states that any person who is consulted is required to provide reasonable assistance to the Lead Authority to support the preparation of the plan.

Any person who has functions in relation to the risk assessment and management of an individual subject to an OLR is to have regard to the standards, guidelines and guidance set by the RMA.

Preparation, implementation and review of a risk management plan

Yes
No

AIR – Annual Implementation Report
OLR – Order for Lifelong Restriction
RMA – Risk Management Authority
RMP – Risk Management Plan

Court

OLR
imposed

Lead authority

Preparation
of RMP

Implementation
of RMP

**Preparation
of AIR**

Actual or potential
significant change?

Review of RMP
Does RMP remain suitable?

RMA

Guidance or
Direction on RMP

**Submission and
approval of RMP**
Is RMP approved?

Evaluation of AIR
Is RMP implementation satisfactory?

Guidance or
Direction on AIR
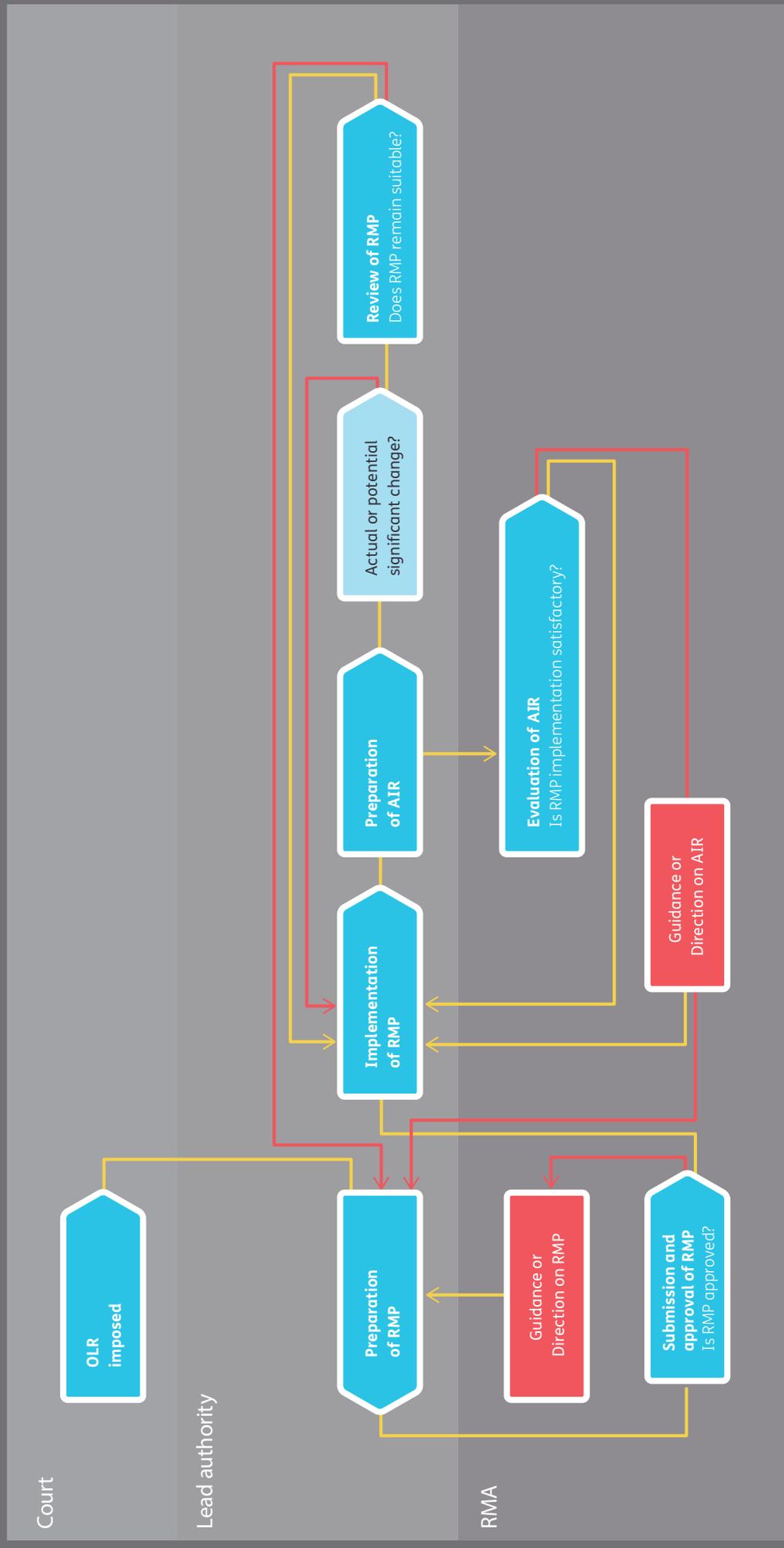
The Risk Management Planning Process: Guidance

OLR
imposed

Order for Lifelong Restriction Imposed

The Lead Authority is asked to inform the RMA immediately when it becomes responsible for an individual who is subject to an OLR. This enables the RMA to provide assistance to the Lead Authority to meet the requirements set out in the legislation, and to have regard to Standards, Guidelines and Guidance issued by the RMA.

RMA staff are available to offer information, advice and support regarding any aspect of the OLR process. The RMA's OLR Case Workers will be the first point of contact for any queries or correspondence and will regard the Case Manager as the Lead Authority's point of contact for any queries or correspondence regarding the RMP.

Preparation
of RMP

Preparation of a Risk Management Plan

The Criminal Justice (Scotland) Act requires the Lead Authority to prepare an RMP for each individual who is subject to an OLR. The purpose of the RMP is to identify and co-ordinate the necessary measures to minimise risk and encourage rehabilitation.

Requirements

The RMP must:

- set out an assessment of risk

- set out the measures to minimise the risk and how those measures will be co-ordinated

- be in the form specified by the RMA

- be prepared with regard to the Standards and Guidelines set out by the RMA[49]

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49   Criminal Justice (Scotland) Act 2003, Part 1, s5(2) & s6(3)

Approach

In preparing the RMP, the legislation requires the Lead Authority to consult with anyone who is likely to have responsibilities or functions within the plan and requires that those consulted provide appropriate assistance to the Lead Authority.[50] As such, it is vital that a collaborative, multi-agency approach is adopted from the outset, and that this is clearly evidenced within the RMP.

During transitional periods this collaborative and multi-agency approach is of particular importance. For example, when the punishment part has expired and a prisoner becomes eligible for release on life licence, the Lead Authority should develop a plan that gives consideration to risk management strategies for both the custodial and community setting. This will require that the Lead Authority works collaboratively with community based partners to consider likely risk scenarios and develop appropriate risk management measures.

It is also important that the RMP is developed in conjunction with the individual who is subject to an OLR and the RMP should clearly evidence attempts to engage the individual in the development of the plan.

Preparing the RMP

The Case Manager will co-ordinate the preparation of the RMP on behalf of the Lead Authority. In preparing the plan, the Case Manager, or delegated individual, should seek input from the individual who is subject to the OLR, and from relevant professionals and agencies who are involved in the management of the case, or who may have historic or current information regarding the individual. The initial RMP should be significantly informed by the RAR, which was completed at the point of sentencing.

In preparing the RMP, the Case Manager should be supported by the RMT who should review and agree the RMP before submitting it to the RMA for approval.

The task of developing the initial RMP will take place within a secure setting however it is important that a collaborative approach is maintained. Community based partners may have relevant information regarding the family and social context of the individual, and their previous reponse to supervision or treatment. In addition, Local Authority representatives will have contact with the individual throughout their sentence and will be responsible for managing them on licence from the point of release. It is therefore important that they are involved in the planning process from the outset. To facilitate this, community based Criminal Justice Social Work representatives should be issued with a standing invitation to attend the RMT, although it is acknowledged that in many cases it may not be necessary or appropriate for them to attend RMT meetings on an ongoing basis, particularly where a lengthy punishment part has been set. It is expected that community based Criminal Justice Social Work representatives should attend early meetings of the RMT to inform the development of the initial RMP, and that the RMP will be shared with them to guide their ongoing work with the individual during the course of their sentence.

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50   Criminal Justice (Scotland) Act 2003, Part 1, s8(2) & (3)

Thereafter, the appropriate level of representation at RMT meetings should be negotiated and agreed between key partners.

As the individual becomes eligible for progression or consideration of release on life licence, it will be essential that key partners who will make up the community based RMT are invited to contribute to the preparation of the plan. Representatives of the receiving Local Authority should work collaboratively with the Lead Authority to ensure that suitable risk management strategies are identified before the point of release. It may be necessary to involve senior managers from the community who are able to speak to the allocation of resource. It may also be appropriate to invite other key partners such as police, health and housing to inform the development of the risk management strategies. This process should begin two years (but not less than 1 year) before the expiry of the punishment part or consideration for parole, or at the point of progression to less secure conditions. This will ensure there is sufficient time for the process of joint planning and RMA approval of the plan prior to community access being granted and that an approved RMP is available to inform the decision-making of the Parole Board.

Timescales

An initial RMP is to be prepared by the Lead Authority and approved by the RMA within nine months of the date that the OLR was imposed by the Court.[51] To facilitate this, the Lead Authority should submit the initial RMP to the RMA within seven months of the date of sentence to allow two months for the completion of the RMA's approval process.

Where the punishment part expires within nine months of the date of sentence, the initial RMP should be developed in conjunction with community based partners. This will ensure that proportionate consideration has been given to developing appropriate risk management strategies in the event that the Parole Board directs the release of the prisoner.

In all other cases, collaborative efforts to develop appropriate and proportionate risk management strategies should begin two years (but not less than 1 year) before the punishment part of the sentence expires, or the prisoner becomes eligibile for consideration of release on life licence. Where, on consideration of a case, the Parole Board does not direct release and sets a date for the next review, the Lead Authority should make arrangements with community based partners to allow sufficient time to review the plan in preparation for the next Parole Board Tribunal.

Where the Lead Authority is submitting an amended RMP following a significant change in the circumstances of the case, a reasonable timescale for submission should be negotiated with the RMA prior to submission, based on the requirements of the case.

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51   Criminal Justice (Scotland) Act 2003, Part 1, s8(1)

Submission and Approval of a Risk Management Plan

The Criminal Justice (Scotland) Act 2003 outlines the process, timescales and criteria for the evaluation and approval of the RMP.

Submission and Approval of an Initial RMP [52]

Following the imposition of an OLR, the receiving Lead Authority is to prepare an RMP which is to be approved by the RMA within 9 months of the date of sentence. To facilitate this, the RMP should be submitted to the RMA no later than seven months after the OLR is imposed. This allows a two month period for the approval process to be carried out. The approval process includes the RMA reviewing the RMP and if necessary rejecting the RMP and receiving a revised RMP from the Lead Authority, before final approval is granted by the RMA within the statutory 9 month timescale. The RMA has legislative power to issue a direction to the Lead Authority to ensure that an approved RMP is in place within the 9 month timescale. The Lead Authority is obliged to comply with any such direction but can appeal to the Sheriff on the grounds that they feel the direction is unreasonable.[53]

Submission and Approval of an Amended RMP

Where an approved RMP is already in place but there has been or is likely to be a significant change in the circumstances of the case, the Lead Authority is to review the RMP. Where the review indicates that the current RMP is, or is likely to become, unsuitable, the Lead Authority (or a different Lead Authority determined in line with the legislation) is to prepare an amended plan. As with the initial RMP, this should be submitted to the RMA for evaluation and approval. The same approval criteria will apply, however the timescale for the submission of the amended plan will be negotiated with the RMA on a case by case basis.

Approval process

Under the Criminal Justice (Scotland) Act 2003 the RMA has power to:

- receive submissions of RMPs for approval from Lead Authorities;

- review and evaluate the RMPs against the approval criteria (outlined below);

- approve or reject RMPs;

- issue guidance as to the preparation, implementation or review of any RMP; and

- give directions (where required) regarding the preparation or implementation of a revised RMP.

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[52] The relevant aspects of this process are outlined in the Criminal Justice (Scotland) Act 2003, Part 1, s8

[53] Information regarding the appeal process (Summary Application Procedure) is available from the Scottish Court Service. www.scotcourts.gov.uk/taking-action/summary-applications

Approval Criteria

The RMA can reject an RMP if the RMP:

- is not submitted in the specified form;

- does not set out an assessment of risk;

- does not set out the measures to be taken for the minimisation of risk or how such measures are to be co-ordinated; and

- disregards any standard, guideline or guidance the RMA has provided.

> Guidance or
> direction on RMP

Guidance or Direction on a Risk Management Plan

The legislation allows the RMA to issue guidance or direction in relation to RMPs under certain circumstances.[54]

The RMA may issue guidance (either generally or in a particular case) regarding the preparation, implementation or review of any RMP.

Where an RMP (initial or amended) is rejected, the RMA may issue the Lead Authority with guidance to support them to prepare and submit a revised RMP.[55]

Where an initial plan has been rejected and the RMA considers that without issuing a direction the Lead Authority will not be in a position to comply with the legislative requirement to prepare the RMP within 9 months, the RMA may issue a direction to the Lead Authority regarding the preparation of a revised RMP.

Where an amended plan is rejected, and the Lead Authority fail to comply with the guidance issued by the RMA, the RMA may issue a direction to the Lead Authority regarding the preparation of a revised RMP.

The legislation states that in any case where the RMA have issued a direction the Lead Authority or person to whom the direction is given, must comply. If they believe that the direction is unreasonable, they have the right to appeal to a Sheriff.[56]

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54   The issuing of guidance or directions is outlined in the Criminal Justice (Scotland) Act 2003, Part 1, s8

55   Criminal Justice (Scotland) Act 2003, Part 1, s6(6)

56   The right to appeal is outlined in the Criminal Justice (Scotland) Act 2003, Part 1, s8(7). Information regarding the appeal process (Summary Application Procedure) is available from the Scottish Court Service. www.scotcourts.gov.uk/taking-action/summary-applications

Implementation
of RMP

Implementation of a Risk Management Plan

Once the RMP is approved, the Lead Authority (and relevant others) are to deliver the identified risk management strategies and activities in accordance with their functions, and with regard to any standards, guidelines, or guidance issued by the RMA.[57]

Preparation
of AIR

Preparation of an Annual Implementation Report

The Criminal Justice (Scotland) Act 2003 requires the Lead Authority to report annually to the RMA regarding the implementation of the plan.[58] Whilst there is no legislative requirement to formally review the RMP on an annual basis, the preparation of the AIR facilitates the Lead Authority to review the RMP and re-evaluate the current risk assessment on an ongoing basis. This will allow the RMT to evaluate their progress in delivering the identified risk management strategies, and the individual's progress in engaging with the process of change.

The purpose of the AIR is to provide assurance and evidence that the Lead Authority and those who have functions under the plan have implemented the RMP, that identified measures have been co-ordinated and delivered as planned, and that this has been done with regard to the RMA's Standards and Guidelines. To satisfy the requirements for annual reporting, the Lead Authority should submit the current version of the RMP alongside a progress record which provides details of how the plan is being implemented. The RMP should be up-to-date, incorporating any minor changes such as updates to personnel or changes in scheduling or delivery of risk management measures. The progress record will provide a means to track implementation and change against the identified risk factors. Regular completion of this record promotes good practice, as it encourages ongoing assessment, review and planning, and aids formal review and reporting requirements.

57   Criminal Justice (Scotland) Act 2003, Part 1, s9.

58   Criminal Justice (Scotland) Act 2003, Part 1, s9(4)

The progress record should outline any deviations from the plan, the rationale for this, and the alternative steps that have not been taken. Examples of such a deviation might include circumstances in which strategies were not delivered for operational reasons, or the impact of non-engagement. This information should be recorded in the updated RMP and progress record. There should be clear evidence of multi-disciplinary collaboration and efforts to involve and engage the individual in their own RMP.

The progress record should be prepared by the Case Manager in collaboration with the RMT, and should be reviewed and agreed by the Head of the RMT before being submitted to the RMA.

Timescales

The Lead Authority is to submit the AIR within 12 months of the date on which the current RMP was approved by the RMA.
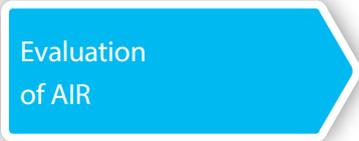
Evaluation
of AIR

Evaluation of an Annual Implementation Report

Following submission of the AIR, the RMA will consider whether the Lead Authority and others are implementing the RMP in accordance with their functions, and with regard to standards, guidelines or guidance that the RMA has issued.

The evaluation will be facilitated by a progress record which clearly documents:

- what was planned for the year under review

- what occurred during the year

- the reasons for any disparity between what was planned and what occurred, and

- evidence of compliance with, or explanation for deviation from the RMA's standards, guidelines and guidance.

<div style="background:#e8544f;color:white;padding:10px;border-radius:8px;">Guidance or
Direction on AIR</div>

Guidance or Direction on an Annual Implementation Report

The RMA may issue guidance regarding the preparation, implementation or review of an RMP.[59] Where the evaluation of the AIR indicates that an amended RMP may be required or that changes to the implementation or review of the plan may be necessary, the RMA may issue guidance to the Lead Authority.

Where the RMA considers that the Lead Authority or a specific individual is failing, without reasonable excuse, to implement the RMP in accordance with their functions, the RMA may give directions to the Lead Authority or individual regarding the implementation of the plan.[60] The Lead Authority is required to comply with the direction but has a right to appeal to a Sheriff against the direction on the grounds that it is unreasonable.[61]

<div style="background:#bfe0f0;padding:10px;">Actual or Potential
Significant Change</div>

Actual or Potential Significant Change

Section 9 (5) of the Criminal Justice (Scotland) 2003 Act states that "where there has been, or there is likely to be, a significant change in the circumstances of the offender, the Lead Authority is to review the plan".

It is for the Lead Authority to determine what may constitute a significant change in the context of an individual case. A significant change may include events such as:

- transfer from one Lead Authority to another

- transfer to more/less secure conditions

- moves between one prison/secure setting and another

- a change in the individual's address whilst in the community

- commission of a further offence

- relapse to substance misuse

- physical/mental health changes

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59   Criminal Justice (Scotland) Act 2003, Part 1, s6(6)

60   Criminal Justice (Scotland) Act 2003, Part 1, s9(2)

61   The right of appeal is laid out in the Criminal Justice (Scotland) Act 2003, Part 1, s9(3). Information regarding the appeal process (Summary Application Procedure) is available from the Scottish Court Service. www.scotcourts.gov.uk/taking-action/summary-applications

Where a review has been carried out in light of an actual or potential significant change, and the Lead Authority considers that the existing plan is, or is likely to become unsuitable, it is to prepare an amended plan. Where a review has been carried out and it is not appropriate for it to continue as Lead Authority, a different Lead Authority is to prepare an amended plan.[62] In either case, the Lead Authority responsible for preparation of the amended plan should contact the RMA to discuss the timescale for preparation of that plan.

Where a change of Lead Authority is planned or considered likely, it will fall to the new Lead Authority to prepare the plan. The current Lead Authority should support the receiving Lead Authority in preparing the amended plan.

RMA staff are available to offer information, advice and support regarding significant changes, or any aspect of the RMP process.

Periods of Transition

As the offender moves through the various stages of their sentence, they will experience periods of transition which may represent a significant change. These transitional stages are likely to include:

- transfer between security levels or locations whilst in a secure setting

- transfer between secure settings (for treatment)

- transfer from a secure setting to the community (release)

- transfer from the community back into a secure setting (recall)

- transfer from one community area to another

Such transitions will result in a shift in case management responsibility and may involve significant change for the individual, particularly where it results in a transfer from one Lead Authority to another. It is important that transfer occurs as seamlessly as possible. Whilst some transitions may be unexpected and unplanned, wherever possible periods of transition should be prepared for vin advance and carefully managed.

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62   Criminal Justice (Scotland) Act 2003, Part 1, s9(6)

The existing Lead Authority will have a vital role in supporting smooth transition. In addition to transferring all relevant documentation, the existing Case Manager should ensure that broader knowledge regarding the management of the individual is shared with the new Case Manager. This information should be communicated in a timely fashion. The current Case Manager will also have an important role in preparing the individual for transition, and wherever possible joint work should be undertaken between the existing and new Lead Authority to promote the individual's engagement and to minimise the potential for manipulation of staff.

Whenever an individual is transferred, the new Lead Authority should inform the RMA that they have assumed responsibility for the case and should provide details of the allocated Case Manager and Head of the Risk Management Team.

The processes relating to the preparation, implementation and review of an RMP which are outlined above will apply during these periods of transition, however the following additional guidance is offered regarding a number of these key stages:

Progression to less secure conditions

Where the RMT considers that an individual meets the criteria for progression to less secure conditions[63], they should review the RMP to ascertain whether the identified risk management strategies are sufficient to manage the risk in the context of a more relaxed regime. A transfer from closed conditions to National Top End or the Open Estate within prison, or from a high to a medium or low secure facility within a forensic health setting will result in decreased restrictions and may include the potential for community access. Under such circumstances it is likely that the RMP will need to be amended to include strategies for managing the risk in this new context.

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63   There are established criteria for progression in both health (Scottish Government (2010), and prison contexts (Scottish Prison Service (2011).

When planning for special escorted leave or other forms of community access, the Lead Authority should consult with relevant community based partners well in advance of any community access being granted. This will ensure that appropriate measures have been put in place and will allow the opportunity to begin establishing links with community partners in preparation for future release.

Where the individual is subject to a deportation order, the Lead Authority should consult with the United Kingdom Border Agency (UKBA) not less than 18 months before any community access is granted. This will enable UKBA to put in place appropriate procedures and will allow them to share any additional information that might inform risk management decisions, including possible flight risk.

If the Lead Authority has reviewed and amended the plan in preparation for progression to less secure conditions, the plan should be submitted to the RMA for approval before the individual is moved. Once the plan has been approved, the individual can be transferred at the discretion of the Lead Authority.

Transfer

There are a range of circumstances under which it may be necessary to transfer an individual who is subject to an OLR. Transfers may occur between establishments within the same Lead Authority, or between Lead Authorities. In each case, existing protocols for the transfer of prisoners should be followed, however, if the transfer constitutes a significant change the Lead Authority is to review the RMP to determine whether amendments to the plan are required.

The following guidance is offered concerning the transfer of an OLR prisoner:

Between locations within a secure setting
Whilst they reside within a secure setting, the individual may be transferred between establishments or locations which are managed by the same Lead Authority. This may be necessary for operational or other reasons and the move may be planned or unplanned. Examples would include transfer from one prison to another, or from one hospital facility to another. Although such a transfer may not be indicative of a significant change, it will be necessary for the Lead Authority to consider whether any changes are requried to the risk management strategies and to amend these accordingly. All documentation and information should be shared with the receiving establishment.

Between secure settings

It may become necessary or appropriate to transfer an OLR prisoner from custody to a health setting for assessment or treatment during the course of their sentence. In such cases, normal protocols regarding the transfer of prisoners for treatment should be followed.[64] Where it is known that the transfer is short-term and temporary, the prison establishment may continue to act as the Lead Authority until the prisoner is returned to the custodial setting. However, if it is determined that the prisoner should remain in the hopsital setting, the hospital will become the Lead Authority and will be required to review and amend the RMP and to submit it to the RMA for approval in line with the guidance regarding the preparation of an RMP, and the submission and approval of an RMP.

Where an individual has been subject to treatment within a health setting, and treatment is no longer required, they will be returned to a custodial setting to continue to serve their sentence. For those subject to an OLR, release to the community can only be directed by the Parole Board.

Between Local Authorities

Where an individual moves from one community area to another and this results in a change of Local Authority, the new Local Authority will become the Lead Authority. Where the Lead Authority concludes that this constitutes a significant change, they will be responsible for reviewing and (if necessary) amending the RMP. Any amended RMP should be submitted to the RMA for approval. The approval of the Parole Board is required before an individual can move between Local Authorities.

The existing Case Manager should support the new Local Authority to receive the individual by sharing all available information and knowledge regarding the case. This will involve joint planning and a collaborative approach to ensure that identified strategies can be established in the new area, and that the individual is given the opportunity to engage with new personnel. If the move is planned, preparations should begin in advance to ensure a smooth transition.

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64   The Memorandum of Procedure on Restricted Patients addresses the transfer of prisoners for treatment of a mental
      disorder. Scottish Government (2010)

Release

Like life sentence prisoners, OLR prisoners do not have an identified Earliest Date of Liberation.[65] Their date of release will be determined by the Parole Board following the expiry of the punishment part of their sentence, and will be based on considerations of the risk that they pose. Once released, the offender will be subject to licence conditions under the Prisoners and Criminal Proceedings (Scotland) Act 1993 and will be supervised by a Local Authority Social Worker.

To ensure that practice is ethical and defensible and that appropriate contingency measures are in place, planning for potential release should begin 2 years (but not less than 1 year) before the expiry of the punishment part, although it is acknowledged that the individual may remain in the secure setting after their punishment part has been served. Where the punishment part of the sentence has expired but the Lead Authority (in discussion with key partners) assesses that the risk posed by the individual remains unmanageable within a community context it is accepted that the degree of joint planning may be limited to outlining the emergency measures that would be invoked if the individual were to be released. It will be imperative that any discussion regarding the manageability of risk within the community involves community based partners.

The release of an OLR prisoner is likely to represent a significant change and every effort should be made to develop plans well in advance of the individual being granted access to the community. This will require that the Lead Authority collaborates with community based agencies to ensure suitable community based risk management strategies have been identified. The Case Manager within the secure setting should work with the identified Local Authority to ensure that relevant information is shared, that appropriate plans are identified, and that wherever possible there is continuity of service delivery.

In preparation for release, the receiving Lead Authority should identify a Case Manager[66] and members of the RMT to engage in discussions with the existing RMT so that decisions regarding community risk management can be agreed and resourced.In most cases the functions of the community based RMT will be assumed by MAPPA.

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65   Earliest Date of Liberation applies to long term determinate sentences (those serving more than 4 years). It denotes the 2/3rds stage of sentence and is the point at which the prisoner is released on licence into the community until the sentence end date.

66   It is acknowledged that a community based Supervising Officer will already have been identified within 21 days of sentence, as per the requirement to do so outlined in the ICM Guidance Manual (Scottish Prison Service, 2007, p12). It will be for Local Authorities to determine whether it is appropriate for the identified Supervising Officer to assume the role of OLR Case Manager.

Following release, the receiving Local Authority will become the new Lead Authority and will be responsible for reviewing and amending the RMP. The amended plan should be submitted to the RMA for approval as soon as practicable following the individual's release, but within a timescale to be agreed with the RMA.

In certain circumstances, release may be expidited or may involve additional considerations. Examples might include cases where an application is made for Compassionate Leave, or the individual is subject to a Deportation Order. In such instances, the Lead Authority should refer to the relevant protocols and procedures, and should contact the RMA for advice on the timescales for the submission and approval of the RMP.

Recall

In the event of recall to custody, the receiving prison will assume the responsibilities of the Lead Authority.

The prison establishment will not be expected to submit an amended RMP to the RMA until it has been confirmed that the Parole Board are not going to direct the immediate re-release of the prisoner. However the RMT within the prison should take initial steps to gather relevant information and ensure that sufficient measures are put in place to assess and manage the risk posed by the individual within the custodial setting. Once the recall has been confirmed, the prison should liaise with the Lead Authority who had responsbility for managing the case in the community to ensure that all available information is used to inform the development of the amended RMP.

Following recall, the amended RMP should be submitted to the RMA for approval as soon as is practicable, but within a timescale to be agreed with the RMA.

In the event that the prisoner is re-released following recall, the Local Authority will resume responsibility for the case and will review the RMP. If the new Lead Authority considers that the current RMP is unsuitable then it is to submit an amended plan to the RMA for approval within a timescales to be agreed with the RMA.

Review of RMP
Does RMP remain suitable?

Review of Risk Management Plan

Regular and ongoing review should be integral to the risk management process to ensure that the RMP remains proportionate and appropriate. The frequency with which the case is reviewed should be determined by the requirements of the individual case. However, the Lead Authority is required to prepare an annual report regarding the implementation of the RMP indicating that a review of case management arrangements should occur at least annually.

In addition to the process of ongoing review though, the Criminal Justice (Scotland) Act 2003 makes special provision for a formal review in light of a significant change in the circumstances of the offender. The guidance regarding actual or potential significant change outlines some of the circumstances which may constitute a significant change, but this list is not exhaustive and it will fall to the Lead Authority to determine whether any change in circumstances is significant.

In the event that such a change occurs, or is likely to occur, the Lead Authority is to review the RMP to determine whether the identified risk management strategies remain suitable and sufficient to manage the risk.[68] This will require that the level of risk is re-evaluated and if necessary, re-assessed.

If the existing risk management strategies remain suitable, then it will not be necessary to amend the RMP and implementation of the current plan can continue. However, if the RMP is, or is likely to become unsuitable, then the Lead Authority is required to prepare an amended plan in line with the guidance regarding preparation of a risk management plan.[69]

In cases where a significant change is likely to result in an increase or reduction in the level of restriction, it will be important that the level of risk posed by the individual is reassessed and that this assessment is subject to appropriate scrutiny and challenge. It may be appropriate to seek the views of professionals who can offer an objective opinion on the case.

Where the individual is progressing towards transfer from one Lead Authority or another, the current Lead Authority should work collaboratively with the future Lead Authority to jointly prepare a plan.

If the significant change indicates that a change of Lead Authority is likely or required, then the new Lead Authority is to prepare an amended plan. It is considered good practice for the previous Lead Authority to support the new Lead Authority in this process.

Any amended RMP should be submitted to the RMA for approval in line with the approval process outlined in the guidance regarding the submission and approval of an RMP. Updated plans submitted alongside the progress record do not require to be approved by the RMA.

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68   Criminal Justice (Scotland) Act 2003, Part 1, s9(5)

69   Criminal Justice (Scotland) Act 2003, Part 1, s9(6)

Chapter 3
Guidance: Risk Management Plan
and annual progress record templates

Risk Management Plan Template

The Criminal Justice (Scotland) Act 2003 requires the Lead Authority to prepare a Risk Management Plan (RMP) for each individual who is subject to an OLR.

The purpose of the RMP is to identify and co-ordinate the necessary measures to minimise risk and encourage rehabilitation.

The RMP is to be in the form prescribed by the RMA and should set out:

- an assessment of risk;

- the measures to be taken for the minimisationof risk, and

- the co-ordination of such measures.

For RMPs to be approved by the RMA, they must evidence that there has been regard to the standards and guidelines outlined in Chapter 1.

The template that follows has been designed to support the preparation of an RMP that meets the 'form' specified by the RMA, in a manner that is consistent with the RMA standards and guidelines. Guidance regarding the completion of the template is provided below. RMA staff are available to offer advice and guidance on the preparation and submission of RMPs.

Order for Lifelong Restriction

Risk Management Plan for <<Name of Offender>>

VERSION CONTROL

Version	Author	Organisation	Date	Notes
0.1				

KEY DATES

Date of OLR	
Punishment Part Expiry Date	
Date of RMP Implementation	

OFFENDER INFORMATION

Full Name	
Date of Birth	
Address of Current Location	
Offender Status Information	

LEAD AUTHORITY DETAILS

Lead Authority	
Address	
Case Manager	
Telephone Contact	
Email	

ATTACHMENTS

Summary of Risk Assessment

BASIS OF ASSESSMENT (Identify key sources of information e.g. risk instruments, reports, multi-agency discussion etc)	

CONCISE CASE SUMMARY	

ANALYSIS OF OFFENDING AND RISK FORMULATION	
Brief history of offending (including index offence).	
Describe the cycle of events, thoughts, feelings and behaviours that precede and follow an episode of seriously harmful offending.	
Identify the relevance of key factors contributing to offending behaviour (i.e. pre-disposing, precipitating, perpetuating and protective factors).	
Provide a summary of the risk of serious harm in terms of the pattern, nature, seriousness, likelihood and imminence. Include a conclusion on the overall risk level.	

Risk Management Plan

IDENTIFY THE RISK(S) TO BE MANAGED IN THIS PLAN:

-
-
-

DESCRIBE THE RISK(S): (Consider the context(s) and time frame of the plan and explain how the risk(s) may present in terms of 'what', 'to whom', 'when', 'why' and 'how'.)

-
-
-

RELEVANT FACTORS

Predisposing Factors	Precipitating Factors	Perpetuating Factors	Protective Factors

MEASURES OF CHANGE

Early Warning Signs/ Behaviours to Monitor	Indicators of Positive Change

RISK MANAGEMENT STRATEGY	Relevant Factor	Activity	Priority	Date for completion or review	Responsible Agency/Individual	Context
Supervision						

RISK MANAGEMENT STRATEGY	Relevant Factor	Activity	Priority	Date for completion or review	Responsible Agency/Individual	Context
Monitoring						

RISK MANAGEMENT STRATEGY	Relevant Factor	Activity	Priority	Date for completion or review	Responsible Agency/Individual	Context
Intervention or Treatment						

RISK MANAGEMENT STRATEGY	Relevant Factor	Activity	Priority	Date for completion or review	Responsible Agency/Individual	Context
Victim Safety Planning						

LIMITATIONS OF STRATEGIES

MONITORING AND CONTINGENCY ACTIVITIES

DESCRIBE THE RISK(S): (Consider the context(s) and time frame of the plan and explain how the risk(s) may present in terms of 'what', 'to whom', 'when', 'why' and 'how'.)

-
-
-

Immediacy/Degree of Alert	Behaviours or events to Monitor/Early warning signs	Agreed Actions	Responsible Agency/Individual
Be Aware			
Be Prepared			
Take Immediate Action			

Please be aware that unforeseen circumstances may arise that are not covered by the actions above. In such circumstances the key contacts listed below should be used to ensure formulation of an appropriate response; actions and ongoing accountability.

Key Contacts

Name	Role	Organisation	Email/Telephone (inc out of hours)

REVIEW OF PLAN	
Date of current RMP:	
Date of next review of RMP:	

Confirmation of Collaboration

- The risk management team represents a collaboration between; _____

- A risk management team has been formed with members from agencies and professions relevant to the offender; and

- Risk management team members have been provided a copy of the RMP and have no disagreement with its content and requirements.

The Case Manager appointed by the Lead Authority is _____

In the absence of the Case Manager, _____ who is a member of the risk management team, will act in this position.

Risk Management Plan: Agreement

The Risk Management Plan has been prepared by:

Signed _____ Designation _____ Date _____

Manager:

Signed _____ Designation _____ Date _____

Risk Management Plan Template: Guidance

The RMP is to be submitted in the form specified by the RMA**.**

The guidance that follows provides advice regarding the completion of the various sections of the RMP. Approval of RMPs is based on an evaluation of the extent to which the plan demonstrates regard to the standards and guidelines outlined in Chapter 1. RMA staff are available to offer advice on the use of this document and the preparation and submission of RMPs, however the responsibility for preparing and implementing an appropriate RMP rests with the Lead Authority.

Version Control

In order to track changes in the RMP it is important to maintain a version control system.

The initial approved RMP should be designated Version 1.0.

Updated versions of the RMP which are submitted alongside a progress record (i.e. those containing minor amendments, such as changes to personnel) should be designated Version 1.1, 1.2, 1.3 etc.

Amended versions of the RMP that require RMA approval (i.e. those submitted following a formal review prompted by a significant change) should be designated version, 2.0, 3.0, etc.

Please record the author of the current plan, the organisation for which they work, and the date that the plan was prepared. Within the notes field, please outline whether it is an initial RMP, a current/updated RMP submitted for annual reporting purposes, or an amended RMP requiring RMA approval in light of a possible or actual significant change. Include relevant details regarding any likely significant changes (e.g. Parole tribunal, transfer to National Top End or Open Estate).

Key Dates

Record the date of OLR, and expiry date of the punishment part of the sentence in the table provided. The date of RMP implementation is the date that the RMP is approved by the RMA. For initial RMP's this should be left blank until the RMA has approved the RMP. The date of RMP implementation will become the baseline date which informs the dates for the subsequent submission of the AIR.

Offender Information

Record the full name, date of birth and address of the individual. Use the section on Offender Status Information to record known information regarding any special conditions associated with or arising from the offending behaviour. Examples might include:

- restricted patient status

- a Schedule 1 offence

- notification requirements relating to a sexual offence

- appeal against conviction or sentence

- imposition of a Sexual Offences Prevention Order (SOPO)

Lead Authority Details

Record details of the relevant Lead Authority including the address, designated Case Manager, and telephone and email contact details.

Attachments

Where an RMP being submitted to the RMA includes an updated risk assessment, the relevant risk instrument paperwork should be attached. The RMA do not require the submission of other supporting documentation, however the RMP should contain a record of decision-making and should refer to relevant documentation where appropriate (e.g. minutes of multi-agency discussions, risk assessment reports etc.). If it is necessary to attach additional documentation, the relevant attachments should be listed and each document should be clearly labelled for easy identification.

Summary of Risk Assessment

Basis of Assessment

Assessments should draw on a range of sources relevant to social, health and offending related issues and should include file, collateral and interview information. The purpose of this section is to evidence your sources.

Identify and list the key documents and sources of historical and current information that have informed the risk assessment and RMP. This may include interview information, reports, chronologies, risk and need assessments (with brief details of any risk assessment tools used and the results), police intelligence, minutes of meetings and multi-agency discussions, records of correspondence, behavioural observation information, third party information, and case file reviews. It should also include details about the methods that have been used to encourage engagement. It will be important to adopt a holistic approach and to consider needs alongside risk where the individual being assessed has specific needs or vulnerabilities (such as in the case of young people or those with a mental disorder). The range of sources should reflect this. The RAR which informed the OLR sentence will be a vital source of information, particularly in the development of the initial RMP.

It is also important to acknowledge the limitations of any assessment. Where there are gaps or inconsistencies in information, or caveats regarding the assessment, these should also be recorded here.

Concise Case Summary

The purpose of this section is to provide the reader with a brief overview of the key historic and current information that is known about the individual based on a review of their case. The information provided should be relevant to the risk assessment and management planning process. The summary should begin with a short bullet-point list of the most salient facts that are known about the individual. The purpose of this list is to provide an immediately accessible introduction for readers who are unfamiliar with the case.

Where the RMP is being updated either routinely, or at the point of annual reporting, it is useful to give a brief summary of recent developments and their implications. For example: record the outcome and feedback from any Parole tribunal, outline any barriers affecting implementation of the plan, comment on the level of engagement, or identify priorities for the forthcoming year.

Risk Formulation

A formulation of risk is an explanation of offending behaviour. The purpose is to identify the factors which cause, trigger, maintain or prevent offending behaviour in order to understand the interaction and respective role of each factor in an episode of offending. The aim is to identify the most appropriate means of preventing further offending and encourage rehabilitation.

This section includes a review of the offending behaviour, an offence analysis, and the identification of relevant risk and protective factors. When considered together, these aspects should lead to an understanding or a formulation of the risk. To support meaningful communication, the conclusions regarding risk of serious harm should be summarised in terms of the pattern, nature, seriousness, likelihood and imminence of offending. This section should be concise and relevant.

A formulation is a hypothesis and as such should be subject to testing and review in light of emerging information.

- **Brief History of Offending**

  Provide a brief offence history. Note any offences which are of particular concern or which indicate a pattern. Where there is reference to allegatory information, ensure that it is clearly marked as such and that its relevance
  and reliability is appropriately weighted.

  Provide a brief summary of the index offence including details of:

  - the circumstances surrounding the offence;

  - a description of the events and degree of planning involved;

  - who was harmed, the seriousness and the outcome, and

  - the individual's reaction or response to the offence.

- **Describe the Cycle**

  Describe the cycle of events, thoughts, feelings and behaviours that precede and follow an episode of seriously harmful offending in order to inform your identification of the relevant risk factors that may contribute to the harmful behaviour and those factors that may interrupt or prevent the cycle from occurring. It may be helpful to consider the antecedents, behaviours and consequences associated with the episodes of offending.

- **Identify the Relevance of Key Factors**
  Drawing on the offence analysis and the findings of any relevant risk assessment tools, explain how the identified risk and protective factors relate to an episode of seriously harmful behaviour.

Understanding the part that risk and protective factors play helps in identifying the risk management activities or approaches that will be required to prevent or minimise the risk. Therefore, the formulation should provide a narrative 'story' or explanation about how the factors combine to contribute to offending.

To assist in identifying how factors are relevant to offending, it can be useful to consider factors under four broad categories: predisposing, precipitating, perpetuating and protective.

Summary of Risk of Serious Harm

The summary of risk of serious harm should provide an indication of the implications for risk management in current and future contexts. It is important to consider where the individual sits on their 'risk journey' and what steps will be required to move them forward. In providing a summary it may be useful to consider and answer the following questions:

- What will it take to reduce the risk and aid progression towards reintegration?

- Can the current risk be safely managed in less secure conditions or in the community? Why / why not?

Outlining a 'roadmap' in this way enhances the applicability and utility of the RMP. It aids transparency by setting out the rationale for the plan, and helps to evidence that the proposed measures are appropriate and proportionate. It can also assist the individual to understand the measures to which they are subject, how they fit in the wider process of moving them forward, and the role that they have to play in their own risk management, progression and reintegration.

Risk of serious harm is defined as:

> "the likelihood of harmful behaviour, of a violent or sexual nature, which is life threatening and/or traumatic, and from which recovery, whether physical or psychological, may reasonably be expected to be difficult or impossible" [70]

Based on the offending history, the offence analysis and the identified risk and protective factors, summarise the risk in terms of the pattern, nature, seriousness, likelihood and imminence of offending. This section should also include consideration of the manageability of risk across contexts.

Referring to the definition of risk of serious harm and the levels outlined below, please provide an opinion on the overall risk level based on the degree of risk of serious harm that the individual poses.

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70   Multi Agency Public Protection Arrangements (MAPPA): National Guidance (2016), *The Assessment and Management of Risk*, *available from http://www.gov.scot/0049/00495086.pdf*

Low

current evidence does not indicate likelihood of causing serious harm;

Medium

there are identifiable indicators of serious harm. The individual has the potential to cause such harm, but is unlikely to do so unless there is a change in circumstances, for example failure to take medication, loss of accommodation, relationship breakdown, drug or alcohol misuse;

High

there are identifiable indicators of risk of serious harm. The potential event could happen at any time and the impact would be serious; and

Very high

there is an imminent risk of serious harm. The potential event is more likely than not to happen imminently and the impact would be serious.[71]

71 Multi Agency Public Protection Arrangements (MAPPA): National Guidance (2016), *The Assessment and Management of Risk*, available from http://www.gov.scot/0049/00495086.pdf

Risk Management Plan

The following sections should be brief; bullet points are more concise and accessible than lengthy narrative. If the previous sections on analysis of offending and formulation have been completed well, the rationale for the following sections should be evident. The purpose of this section of the plan is to clearly identify what needs to be done, by whom and when.

Identify the Risk(s)

Summarise the broad risk(s) to be managed by the plan. There are a number of ways to categorise the risk(s) however, examples might include:

- general violence

- intimate partner violence

- sexual offending (contact/non-contact)

- stalking

- fire-raising

Describe the Risk(s)

The purpose of this section is to outline the likely or plausible scenarios in which serious harm might occur. A scenario describes the likely set of circumstances or events in which an offence may occur and draws on the interaction of risk and protective factors highlighted in the risk formulation. It describes how the various factors interact in a given context and what the likely outcome may be in terms of who may be harmed, how and how seriously. A scenario is not a prediction, but should be credible and based on evidence.

Briefly describe the likely or plausible scenarios that relate to the identified risk(s). Consider the following aspects:

- The context of the individual (are they in a custodial, community or health setting?)

- What is the risk?

- To whom is a risk posed?

- When (in what circumstances) will the risk occur?

- How might this occur?

- Why would the risk manifest under these circumstances?

Case Example

Consider the example of an adult male who is subject to an OLR following conviction for sexually violent offences against adult women.

He is currently being allowed unsupervised access to the community in preparation for release. A reasonable and credible scenario might be as follows:

When in the community setting (context), there is a risk of sexual violence (what), against known or unknown adult women (who) triggered by situations in which he feels stressed, angry or insecure (when). Disinhibited by substance use and a sense of entitlement (when), he may use physical coercion (how) to force victims to engage in sexual acts in an attempt to regain control or a sense of mastery (why).

Relevant Factors

The purpose of this section is to clearly identify the individual factors that will be targeted within the plan. The formulation of risk explores how risk factors function to contribute to an episode of offending, whilst the identified scenarios indicate how those factors are likely to manifest themselves. In light of that understanding, it is important to identify which risk management activities or approaches should be used to appropriately address the risk factors.

Based on the formulation of risk and the identified scenarios, detail the relevant factors that will be targeted by the plan under the following headings:

- **Predisposing factors**
  Predisposing factors are often identified through the application of risk assessment tools as factors which are associated with offending, and are
  noted to be present as criminogenic needs. Within a risk formulation, it is
  important to consider which factors render this individual likely to commit
  a certain type of offence and why. These factors may be amenable to
  change and should be targeted by supervision and treatment/intervention
  strategies. Examples might include impulsivity, substance misuse problems,
  disregard for others, or early and diverse anti-social behaviour.

- **Precipitating Factors**
  Precipitating factors are related to the timing of offending, and may serve
  as precipitants or triggers. The may be events that trigger criminogenic
  needs, or acute dynamic factors which can change rapidly. They should be
  targeted by monitoring, supervision and victim safety-planning strategies.
  Examples might include intoxication, emotional collapse, or a perceived
  slight or rejection.

- **Perpetuating Factors**

  These may be long term issues, responsivity factors or vulnerabilities which are likely to perpetuate rather than ameliorate the risk of offending. They may function by maintaining predisposing factors, or they may act as obstacles to successful intervention. Targeting these factors may increase the efficacy of other interventions; however the factors may merit interventions or treatment in their own right. Examples might include cognitive impairment, a learning disability or a history of trauma.

- **Protective Factors**

  Protective factors are circumstances, relationships or characteristics that have a mitigating effect on the individual's risk of serious harm. When present, they act to prevent, reduce or interrupt the occurrence of an episode of seriously harmful behaviour. As such, they have an important role in risk management, however it is important to note that these are individualised factors and that what proves protective for one person may not be protective for another. Examples might include family or intimate relationships, medication or motivation to engage in supervision.

Measures of Change

Regular review is crucial in evaluating progress and identifying positive or negative change. To support this, it is important to identify behaviours or events which might indicate that risk is increasing or that protective factors or measures to manage the risk are weakening or breaking down. Equally, it is important to consider what emerging behaviours might indicate that interventions are working or that the level of risk is reducing.

- Early Warning Signs/Behaviours to Monitor

  Identify the signs or behaviours which might indicate that offending is imminent, the risk management strategies are breaking down, or that the plan requires review.

- Indicators of Positive Change

  Identify the events, behaviours or circumstances which might indicate that the plan is working or that the risk is diminishing.

Risk Management Strategies

There are four primary strategies to manage risk. These are supervision, monitoring, victim safety-planning and treatment/intervention.

Supervision is a means by which a relationship is established with the individual. The purpose is to ensure that the individual is engaged through dialogue in a process of change and compliance. Supervision may also involve oversight or administration of a Court order or sentence to ensure that any requirements or conditions are being appropriately applied and that compliance with such requirements is being monitored.

Monitoring involves a number of observational activities intended to identify progress or deterioration or draw attention to areas where the RMP needs to be changed.

Treatment/Intervention is a specific programme, activity or technique focused on encouraging change in a particular behaviour or providing treatment for a particular problem.

Victim Safety-Planning is a risk management activity by which attention is drawn to the safety of specific individuals or groups who may potentially be victimised, with a view to devising preventative or contingency strategies.

- **Relevant Factor**
  Within the table identify the factor(s) to be addressed. Depending on the purpose and scope of the activity, you can opt to develop plans in relation to an individual risk or protective factor, a general offence type (e.g. violent offending), or all of the risk factors as a whole.

- **Activity**
  Identify the activity which will be delivered in order to manage the risk factor(s).

- **Priority**

  Guidance regarding the prioritisation of activities and tasks is provided on p23 of the Standards and Guidelines. Within the Priority column assign a rating '1', '2', '3' or 'Not Applicable' to each risk management activity.

  - Assign '1' to activities which need immediate attention.

  - Assign '2' to activities which require intermediate attention.

  - Assign '3' to activities which are deemed to be a low priority at this point in time.

  - Assign 'Not Applicable' where the risk management activity is no longer needed or applicable, e.g. when an offending behaviour programme has been completed.

- **Date for Completion or Review**

  Identify a date by which the activity will be completed or progress will be reviewed.

- **Responsible Agency/Individual**

  Identify which agency or individual is responsible for delivering each activity.

- **Context**

  To support transitional planning, indicate whether the identified activity is relevant to managing risk within a secure setting, a community setting, or both.

Limitation of Strategies

No plan can fully eradicate risk therefore it is important to consider the limitations of the identified strategies and activities. This section should be used to highlight any gaps or weaknesses in the plan. Wherever possible, outline how these limitations might be mitigated. Give consideration to the following:

- areas of uncertainty

- interdependencies between risk management activities

- areas where the success of the plan is reliant on the engagement of the individual

- reliance on the availability of resources or programmes

- gaps in knowledge

- impact of the presence of personality disorder

Monitoring and Contingency Activities

This section of the RMP should be used to document the contingency measures to be taken in response to:

- the appearance of early warning signs

- the weakening or breakdown of the identified risk management strategies

- the weakening or breakdown of protective factors

This section of the plan should aid day to day monitoring and communication, and inform contingency action.

Describe the Risk(s)

This section should duplicate the previous Describe the Risk(s) section (please refer to the guidance provided on page 84) and is intended to act as a quick reference guide to support day-to-day monitoring. This will allow this section of the plan to be shared with staff who may not require access to the full RMP.

Behaviours or Events to Monitor/Early Warning Signs

Record the early warning sign or the behaviour/event to monitor. Identify whether the emergence of this behaviour would require staff to:

- Be Aware – monitor the emerging behaviours closely for any signs of escalation and ensure relevant individuals/agencies are informed about the potential situation

- Be Prepared – ensure that precautionary measures are taken and that staff are alert to the possible situation

- Take Immediate Action – intervene now to deliver identified contingency activities

Agreed Actions

Identify the agreed actions to be taken in the event that early warning signs emerge or the identified behaviours change. These should outline concrete actions to be taken in order to manage or minimise the risk and should indicate the timescales for action. Often adherence to standard operating procedures and existing protocols will be the adequate and appropriate response, and where this is the case, this should be stated. For example, an incident in a prison context might well be the adequate and appropriate response, and where this is the case, this should be stated. For example, an incident in a prison context might trigger a referral to the Risk Management Team, whilst a further offence in the community would result in the preparation of a breach report for the Parole Board. However, it is also important to consider whether there are additional, case specific actions that may be required.

For example, if a prisoner absconds during a community work placement there may be case specific victim safety actions which need to be identified, planned for, agreed and acted upon in addition to the actions which would be generated by standard protocols.

Responsible Agency/Individual

Identify which agency or individual is responsible for delivering each activity.

Key Contacts

Complete the table noting name, role, organisation, telephone number and email address for each of the key personnel or agencies involved. The RMP need not necessarily include out of hours contact details, but protocols should be in place in the event that immediate action is required.

Review of Plan

It is essential that the risk assessment and RMP is reviewed on a regular and ongoing basis to ensure that the identified risk(s) remain relevant and that measures to manage the risk(s) remain proportionate and defensible.

There may be agency-specific statutory arrangements and procedures which dictate routine, minimum review dates.

- Date of Current RMP

  Record the date that the current RMP was approved and implemented.

- Date of Next Review of RMP

  Record the proposed date of the next routine review of the RMP.

The Criminal Justice (Scotland) Act 2003 requires the Lead Authority to review the RMP where there has been or is likely to be a significant change. This is a formal review and is distinct from the routine process of monitoring and review that takes place as part of case management activity.

Confirmation of Collaboration

The purpose of this section is to confirm that the plan has been developed using a multi-agency approach, in collaboration with those who have functions under the plan.

- Provide a list of the members who make up the RMT (including name and designation)

- Identify the designated Case Manager

- Identify a named individual who will act in the absence of the Case Manager

Risk Management Plan Agreement

The RMP should be signed (for RMA purposes, electronic signatures will suffice) by the person who prepared it (usually the Case Manager) and by a suitable manager (usually the Head of the Risk Management Team). In signing the RMP, the Case Manager and Head of the Risk Management Team are indicating that the content of the RMP has been discussed with and agreed by the members of the RMT.

Annual Implementation Report: Template

The Criminal Justice (Scotland) Act 2003 requires the Lead Authority to report annually to the RMA regarding the implementation of the plan.

Reporting annually provides the Lead Authority with the opportunity to review the Risk Management Plan (RMP) and update the risk assessment where this is necessary. It also allows the Lead Authority to evaluate their progress in delivering the identified risk management strategies and the individual's progress in engaging with the process of change. The annual report should comprise of the current, up to date RMP and a progress record outlining how the implementation of the plan is addressing the identified factors. The progress record demonstrates how the Lead Authority and those who have function under the RMP have implemented the identified risk management strategies.

In preparing the progress record it will be important to consider the following elements of the current plan:

■ **Basis of assessment**

Robust assessments should draw on a range of sources including file, collateral and interview information. As time progresses, the sources of information may increase to include details of events, behaviours and planned activities undertaken, programme completion reports, breach/disciplinary action, positive change and achievements. Ensure that you update the 'basis of assessment' section of the RMP to reflect sources consulted over the reporting period.

■ **Update of risk assessment**

The risk assessment should be revisited to determine if a reassessment is required – the level and depth of any reassessment will be guided by the circumstances of the case. Good practice suggests an ongoing awareness of change: routine or annual review will require a stock check, whereas a formal review to determine whether the plan remains suitable will require a more fundamental and fresh consideration of the assessment, formulation and plan. In particular, comment on any newly emerging risk factors, protecive factors, early warning signs or behaviours that will require monitoring. Highlight any changes in the assessment and formulation of risk where applicable.

- **On the basis of a review of the reassessment, are further changes required to the RMP?**

  If a review of assessment indicate changes in the pattern, nature, seriousness, likelihood or imminence of risk, or the measures and strategies to manage risk, ensure that these changes are reflected and addressed within the RMP.

- **Were there any problems or barriers affecting the implementation of the risk management strategies?**

  Highlight any issues which impacted on the delivery or implementation of the risk management strategies. What steps were taken to address these issues? Were the issues resolved? Include this information in the progress record and 'limitations of strategies' section of the RMP.

- **Review the measures of change identified in the RMP and comment on areas of progress or deterioration arising from the implementation of the plan.**

  Consider whether any measures of change identified within the RMP have been evident during the course of the last year. Does this indicate positive progress or deterioration in the level of risk? What action might need to be taken to minimise deterioration or encourage progress?

- **Has the implementation of the RMP resulted in any material change in the overall risk level?**

  The RMP should outline an opinion on the overall risk level within the Summary of Risk of Serious Harm section. Is there evidence that the risk has become more or less manageable? Consider whether the risk is decreasing, remains static, is escalating, or is changing in nature, and ensure that this is reflected in the 'risk assessment and formulation' and the 'concise case summary' sections of the RMP.

The progress record which follows has been designed to sit alongside the RMP, and when submitted together with an updated RMP this will provide the evidence for annual reporting. It provides a means of tracking implementation and change against the risk and protective factors which were identified in the RMP. This will allow to Lead Authority to comment on implementation over the last year and will ensure that the RMP remains a current and dynamic document. Regular completion of the progress record, and active use of the information it summarises, promotes good risk management practice as it encourages ongoing assessment, review and planning. This also facilitates formal review and reporting requirements.

The updated RMP and progress record should be reviewed by the RMT and signed by the Head of the Risk Management Team before being submitted to the RMA alongside a covering statement of assurance (for RMA purposes, electronic signatures will suffice). The current RMP should be updated to include any minor changes such as updates to personnel or changes in the delivery or scheduling of risk management measures. Where appropriate, the updated RMP and progress record can be supported by relevant documentation but this is not required.

If, in reviewing the plan, the Lead Authority determines that the approved RMP is no longer suitable (owing to an actual or likely significant change), an amended plan is required. Amended plans must be submitted to the RMA for evaluation and approval.

The Lead Authority should report on the implementation of the RMP within 12 months of the date on which the current RMP was approved by the RMA, and annually thereafter.

Progress Record Template

Date	Progress Record		
	Relevant Factor	Strategy	Change	Noteworthy Developments/ Evidence of Change

Signed: _____ (Case Manager)   Date: _____

Signed: _____ (Head of RMT)   Date: _____

Progress Record Template: Guidance

Date

Record the date of the event or noteworthy development which is being reported on i.e. when did the event occur?

Relevant Factor

From the current approved RMP, provide details of the risk factor(s) or protective factor(s) against which you are providing an update.

This may relate to:

- all risk factors;
- a type of offending behaviour, e.g. sexual violence, domestic violence;
- a collection of factors, e.g. pro-criminal attitudes, or;
- an individual factor, e.g. hostility toward women.

Strategy

Indicate whether the factor(s) is/are being addressed by means of supervision, monitoring, victim safety-planning or treatment/intervention.

Change

Indicate whether there has been any change (Positive, Negative or No Change) in relation to the identified risk or protective factor(s). If a change in risk or protective factor(s) has occurred for reasons independent of the delivery of action/activities, the change should be recorded and the proposed reason for the change should be discussed within the 'noteworthy developments' section of the progress record. If actions or activities have not been implemented it may be appropriate to indicate that change in relation to these factors is Not Applicable, however an explanation should be offered in the adjacent column. Within this section it will be appropriate to comment on whether any of the Measures of Change which have been identified within the RMP are present.

Noteworthy Developments / Evidence of Change

Provide a brief narrative summary of the progress in delivering the actions/activities outlined in the approved RMP and explore the relationship (if any) between their delivery and any change in identified risk/protective factors. It may be appropriate to note whether the actions/activities are completed, ongoing, pending etc. Authors should be aware that 'noteworthy developments' may not necessarily consitute evidence of change (e.g. changes in the individual's level of engagement or participation in programmes may not indicate a change in risk level).

Consider the following questions:

■ Have the actions/activities outlined in the plan been delivered, or if they have been rescheduled or delayed, for what reason? (Provide details)

■ Has the individual engaged with the activity/intervention?

■ Has the delivery (or non delivery) of an action/activity resulted in any change in relation to the identified factor?

■ Has any change in the identified factor occurred for reasons seemingly unrelated to the delivery of the actions/activity?

Progress Record Sign Off

The progress record should be signed by the Case Manager (or delegated individual) and the Head of the Risk Management Team. For RMA purposes electronic signatures will suffice.

In signing the progress record, the Case Manager and Head of the RMT are indicating that the content has been discussed with and agreed by relevantmembers of the RMT.

Glossary of Terms

A consensus has developed in Scotland about the need to establish a meaningful way of expressing risk that is shared between agencies and across geographic boundaries.[72]

The publication of FRAME has laid the foundation for a shared language of risk by promoting a general set of terms and definitions for risk assessment and management.[73] This document is grounded in those terms and definitions, and seeks to build upon it.

This glossary contains a list of terms which are associated with the OLR process and those which are necessary to develop an understanding of risk practice in the context of assessing and managing risk of serious harm.

Annual Implementation Report

The Criminal Justice (Scotland) Act 2003 requires the Lead Authority to report annually to the RMA regarding the implementation of the plan. The purpose of the AIR is to provide a summary of the Lead Authority's delivery and implementation of the risk management strategies and to provide an update regarding the progress of the offender in relation to the identified risk and protective factors. Annual reporting consists of the submission of a Lead Authority Statement of Assurance, the current updated RMP and a progress record.

Contingency Actions or Measures

Contingency actions or measures should set out the planned and co-ordinated response to the appearance of early warning signs, or the weakening or breakdown of protective factors or risk management strategies. They should be designed to minimise critical risk factors and maximise protective factors in order to prevent harmful outcomes.

Early Warning Signs/Behaviours to Monitor

Early warning signs may be behaviours, events or other indicators which might suggest that offending is imminent, that the risk management strategies are breaking down, or that the plan requires review. If these are detected, they can provide an opportunity to intervene to prevent offending, or to implement contingency action to protect possible victims. Early warning signs may not be present in every case.

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72   Scottish Executive (2001); Barry, M., Loucks, N., & Kemshall, H. (2008)

73   FRAME (Risk Management Authority (2011) contains a chapter regarding the Language of Risk which seeks to establish shared terms and definitions regarding risk assessment and management.

Formulation

See Risk Formulation.

Functions

The Criminal Justice (Scotland) Act 2003 section 6(4) states that an RMP can make provision for any person who might reasonably be expected to assist in the minimisation of risk to have functions in relation to the implementation of the RMP. This includes, but is not limited to, Local Authorities, police, health and prison services.

In preparing an RMP, the Lead Authority is required to consult with anyone on whom it is considering conferring functions and that person is required to provide reasonable assistance to the Lead Authority. Anyone undertaking such functions is to have regard to the standards, guidelines and guidance set by the RMA.

Lead Authority

The Lead Authority has responsibility for the risk management of the individual who is subject to an OLR. The Authority is the appropriate Local Authority when the individual is in the community, the Scottish Ministers when they are in custody and Hospital Managers when they are in secure care.

Multi Agency Public Protection Arrangements (MAPPA)

The legislation governing MAPPA places a statutory duty on the 'responsible authorities' in a local authority area to jointly establish arrangements for assessing and managing risk. MAPPA offers a co-ordinated approach to the management of those subject to Sex Offender Notification Requirements and restricted patients. From 31 March 2016 these arrangements have been extended to include a further category; those who by reason of their conviction are subject to supervision in the community by any enactment, order or licence; are assessed by the responsible authorities as posing a high or very high risk of serious harm to the public, which requires active multi-agency management at MAPPA level 2 or 3 arrangements.

Multi-agency

Multi-agency work is a form of collaboration which may involve personnel from the prison, police, social work and health services (including forensic services); voluntary and third sector organisations and housing organisations. The aim is to ensure that the appropriate range of services are available to support holistic risk management.

Multi-disciplinary

Multi-disciplinary working involves personnel from a range of differing disciplines and professional backgrounds working collaboratively to design and implement an RMP. Multi-disciplinary working helps to ensure that the management and support of the individual is planned and delivered in line with current evidence and knowledge gathered from across multiple fields of learning and practice.

National "Top-end"

A 'top-end' facility is a closed prison hall that is able to provide access to work placements and special escorted leave, but not home leave. Prisoners must meet the standard criteria for progression before they can be considered for a move to less secure conditions.

Open Estate

Open Estate refers to any prison which is designated for the confinement of prisoners who are assigned low supervision level and who are eligible for temporary release in terms of Part 15 (Temporary Release) of The Prisons and Young Offenders Institutions (Scotland) Rules 2011. Prisoners must meet the standard criteria for progression before they can be considered for a move to less secure conditions.

Order for Lifelong Restriction (OLR)

The OLR was introduced into legislation by section 1 of the Criminal Justice (Scotland) Act 2003. It provides for the lifelong management of high-risk violent and sexual offenders. Where an OLR is imposed, the individual will be subject to an RMA approved RMP whilst in custody, in secure care within the mental health system, or in the community for the rest of their life. The sentence will consist of a punishment part which must be served before the individual can be considered for release. Release (or discharge) into the community will not be granted until the Parole Board for Scotland are satisfied that the risk that the individual would pose in the community is acceptable.

Parole

Parole is a system that enables individuals to be released on licence in the community under the supervision of a community based social worker. If an individual is released on parole, they are subject to be recalled to prison at any time if they breach the terms of their licence. Parole is only granted where the Parole Board for Scotland is satisfied that the risk presented by the individual can be managed in the community.

Parole Board for Scotland

The Parole Board for Scotland endeavours to ensure that those prisoners who are no longer regarded as presenting a risk to the public safety may serve the remainder of their sentence in the community under the supervision of a social worker. In OLR cases, it is the Parole Board for Scotland who will determine whether an individual can progress to management in the community.

Parole Unit

The Parole Unit is part of the Justice Directorate of the Scottish Government and has a range of responsibilities which include: advising Scottish Ministers on policy and procedure governing the release of prisoners; undertaking Scottish Ministers statutory functions in terms of referring certain cases to the Parole Board for consideration and acting on reports that individuals on licence in the community have breached their licence; presenting Scottish Minsters' views at Tribunal hearings; sponsorship of the Parole Board and the Risk Management Authority; overseeing the management of children convicted on indictment; and leading a programme of change for the future of parole.

Progression

During the course of their prison sentence, and in preparation for release, an individual subject to an OLR may progress to less secure conditions such as a national 'top-end facility' or the Open Estate. If a prisoner meets the standard criteria for progression, their case will be referred to a multi-agency, multi-disciplinary team chaired by the prison's Deputy Governor or Governor, who will consider whether the risk that the prisoner presents can be safely managed in less secure conditions.

Protective Factors

Protective factors are circumstances, relationships or characteristics within a person, their environment or context that act to prevent, reduce or interrupt the occurrence of an episode of offending behaviour.

Risk Assessment Order (RAO)

After conviction, if a Judge considers at his own instance, or on the motion of the prosecutor, that an offender may meet the risk criteria, the Judge may make a Risk Assessment Order (RAO).

The High Court will then appoint an RMA accredited assessor to carry out a risk assessment and report back to the Court with a RAR. The RAR will assist the Judge in making the decision to impose an OLR or otherwise. The legislation does not allow for the offender to object to the making on an RAO. However the offender may challenge the RAR and may also commission a separate risk assessment.

In relation to mentally disordered offenders, there is an alternative to the RAO. If the Court considers that a mentally disordered offender may meet the risk criteria, it can make an Interim Compulsion Order (ICO) and commission a RMA accredited assessor to compile a report.

Risk Assessment Report

A RAR is the document prepared by an RMA accredited Risk Assessor to inform the High Court's judgement on whether an OLR should be imposed.

Risk Factor

Risk factors are aspects of the individual's personal, inter-personal and environmental context that cause, contribute to or increase the likelihood of the person re-offending. They may include:

- Static Risk Factors - those elements of an individual's past behaviour and its consequences that are historical and factual. These factors do not change with time.

- Stable Dynamic Risk Factors - those areas of an individual's circumstances that endure over a period of time and contribute to the risk of further offending, over months or years. These factors are amenable to change and, if changed may be expected to reduce the likelihood or seriousness of further offending.

- Acute dynamic risk factors - those that change quickly, perhaps over days or hours, and whose emergence indicates a period of critical risk in which serious offending is more likely than not to occur.

Risk Formulation

The purpose of risk formulation is to examine the nature, seriousness and imminence of offending and develop an understanding of how factors interact to result in an episode of offending. It creates a bridge between risk assessment and risk management, and informs the identification of measures to prevent, reduce or interrupt future occurrences of seriously harmful behaviour.

Risk Management Plan (RMP)

An RMP will be prepared by the Lead Authority for every individual who is subject to an OLR. The RMP sets out an assessment of risk, the measures to be taken for the minimisation of risk and how such measures are to be co-ordinated. The plan includes assessment and analysis of factors that may increase or prevent re-offending and gives recommendations for action. It should be developed through multi-agency and multi-disciplinary working.

The status of the RMP will vary according to the stage of the OLR:

- Initial RMP – this is the first RMP that is prepared following sentence. It will always be developed within a secure setting and is to be prepared by the Lead Authority and approved by the RMA within 9 months of the date on which the OLR was imposed.

- Updated RMP – the RMP should be updated to record the decision-making of the RMT, and to capture any minor changes which do not constitute a significant change to the identified risk management strategies. Where an RMP has been updated it should be submitted to the RMA along with the progress record to meet the requirements for annual reporting.

- Amended RMP – where a significant change has occurred and the Lead Authority has reviewed the plan and determined that the current plan is no longer suitable, they should amend the plan and submit it to the RMA for approval.

Risk Management Strategies

Measures to manage risk are made up of four primary risk management strategies: monitoring, supervision, treatment/intervention and victim safety planning. A strategy is a plan of action designed to achieve a specific goal. Each strategy may consist of a range of specific activities designed to target the identified risks and needs.

Risk Management Authority (RMA)

The RMA is an independent Non-Departmental Public Body (NDPB), established in 2005 by the Criminal Justice (Scotland) Act 2003.

Its duties focus on protecting the public by ensuring that robust and effective risk assessment and risk management practices are in place to reduce the risk of serious harm posed by violent and sexual offending. Within this remit, the RMA has specific responsibility to administer and oversee the risk assessment and management processes supporting the OLR sentence. This includes the accreditation of risk assessors to carry out duties on behalf of the High Court, and the approval of RMPs for those subject to an OLR.

RMA Direction

Under the Criminal Justice (Scotland) Act 2003, the RMA has statutory powers to issue directions to a Lead Authority and any other person having functions under the plan, as to the preparation of a revised plan or the implementation of the plan.

RMA Guidance

Under the Criminal Justice (Scotland) Act 2003, the RMA has statutory powers to issue guidance (either generally or in a particular case) as to the preparation, implementation or review of any RMP.

Risk of Serious Harm

The Framework for Risk Assessment, Management and Evaluation defines risk of serious harm as follows:

'There is a likelihood of harmful behaviour, of a violent or sexual nature, which is life threatening and/or traumatic and from which recovery, whether physical or psychological, may reasonably be expected to be difficult or impossible'.

Scenarios

A scenario describes the likely set of circumstances or events in which an offence may occur and draws on the interaction of risk and protective factors highlighted in the risk formulation. It should describe how the various factors interact in a given context and what the likely outcome may be in terms of who may be harmed, how and how seriously. A scenario is not a prediction, but should be credible and based on evidence.

Significant Change

The Criminal Justice (Scotland) 2003 Act states that "where there has been, or there is likely to be, a significant change in the circumstances of the offender, the Lead Authority is to review the plan". It is for the Lead Authority to consider what a significant change may be in the context of an individual case, however, a significant change may include events such as:

- Transfer from one Lead Authority to another

- Transfer to more/less secure conditions

- Moves between one prison/secure setting and another

- A change of address whilst in the community

- Commission of a further offence

- Relapse to substance misuse

Strengths

Strengths may be considered to be positive characteristics, relationships or circumstances that buffer risk/need factors, build resilience and promote pro-social behaviour and lifestyle. Strengths may be well-established features in an individual's life, or may be developed through support and intervention.

United Kingdom Border Agency (UKBA)

The United Kingdom Border Agency is a law enforcement agency with responsibility for overseeing immigration, asylum and removals within the UK.

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